10/14/2010 16:04

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Baxter Healthcare Political Action Committee 1501 K Street, NW ADDRESS (number and street) Suite 375 Check if different than previously Washington DC 20005 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00117838 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Χ Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 09 0 1 2010 09 30 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Sarah Creviston Type or Print Name of Treasurer Electronically Filed by Sarah Creviston 10 14 2010 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004)

FE6AN026

Only

 $\textbf{A.} \hspace{0.2cm} \textbf{Form/Schedule}: \hspace{0.2cm} \textbf{F3X}$

Transaction ID:

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

3 / 87

Write or Type Committee Name

FEC Form 3X (Rev. 02/2003)

Rep	port Covering the Period: From:	01 2010	To: 0 9 3 0 2 0 1 0
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 $20^{\circ}10^{\circ}$		41228.05
(1	b) Cash on Hand at Begining of Reporting Period	73594.47	
(c) Total Receipts (from Line 19)	12175.42	119791.84
(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	85769.89	161019.89
7. T	otal Disbursements (from Line 31)	26000.00	101250.00
3. C	eash on Hand at Close of		
	deporting Period subtract Line 7 from Line 6(d))	59769.89	59769.89
th	rebts and Obligations owed TO ne committee (Itemize all on ichedule C and/or Schedule D)	0.00	
th	neebts and Obligations owed BY ne committee (Itemize all on schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 4 / 87

Write or Type Committee Name

Baxter Healthcare Political Action Committee

Report Covering the Period:

From: 0 9 M

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D D D

Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	10452.88	85001.32
	(ii) Unitemized	1722.54	34790.52
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	12175.42	119791.84
(i	b) Political Party Committees	0.00	0.00
,	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	12175.42	119791.84
	Fransfers From Affiliated/Other Party Committees	0.00	0.00
3. A	All Loans Received	0.00	0.00
	oan Repayments Received Offsets To Operating Expenditures	0.00	0.00
((Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	Fransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(l	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	Otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	12175.42	119791.84
	otal Federal Receipts subtract Line 18(c) from Line 19)	12175.42	119791.84

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

5 / 87

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		I.
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	Committees Contributions to	0.00	0.00
•	Federal Candidates/Committeesand Other Political Committees	26000.00	97500.00
	Independent Expenditure		
	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
i.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
-	Refunds of Contributions To: (a) Individuals/Persons Other The Political Constitution	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
١.	Other Disbursements	0.00	3750.00
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
١.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26000.00	101250.00
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	00000 00	101050 00
	from Line 31)	26000.00	101250.00

DETAILED SUMMARY PAGE

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	12175.42	119791.84
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	12175.42	119791.84
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate so for each categor Detailed Summa	y of the (check only one)
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and address of any politica	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joy A. Amundson Mailing Address 110 W Onwentsia F	Rd	Date of Receipt
City <u>Lake Forest</u> FEC ID number of contributing federal political committee.	State Zip Code IL 60045-2823	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-54 Amount of Each Receipt this Period 230.77
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation CVP, President - BioSciel Aggregate Year-to-Date ▼	nce 353.87
Full Name (Last, First, Middle Initial) Joy A. Amundson Mailing Address 110 W Onwentsia F	Date of Receipt 0 9 1 7 2 0 1 0	
City Lake Forest FEC ID number of contributing federal political committee.	State Zip Code IL 60045-2823	Transaction ID: 20101012151846-54 Amount of Each Receipt this Period 230.77
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation CVP, President - BioScient Aggregate Year-to-Date ▼	nce 1353.87
Full Name (Last, First, Middle Initial) Peter J. Arduini Mailing Address 1059 Warrington R		Date of Receipt
City Deerfield	State Zip Code IL 60015-3343	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-58 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation CVP, President - Med De Aggregate Year-to-Date ▼	900.00
SUBTOTAL of Receipts This Page (optional)	561.54

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 87 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	mmittee		
Full Name (Last, First, Middle Initial) Peter J. Arduini			Date of Receipt
Mailing Address 1059 Warrington Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-58
Deerfield	IL	60015-3343	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Baxter Healthcare Corpora-	Occupatio	n esident - Med Delivery	7
tion Receipt For:		e Year-to-Date	\dashv
Primary General	Aggregate		1
Other (specify) ▼	0 0	1900.00	
Full Name (Last, First, Middle Initial) Robert G. Babicke			Date of Receipt
Mailing Address 162 Cardinal Dr			09 03 2010
City	State	Zip Code	Transaction ID: 20100915172653-10
Hawthorn Woods	IL	60047-7567	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP, Infor	n mation Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Robert G. Babicke			Date of Receipt
Mailing Address 162 Cardinal Dr			09 17 2010
City	State	Zip Code	Transaction ID: 20101012151846-10
Hawthorn Woods	<u>IL</u>	60047-7567	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP, Infor	n mation Technology	
Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	33 133	475.00]
SUBTOTAL of Receipts This Page (optional)			150.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Con	mmittee		
Α.	Full Name (Last, First, Middle Initial) Donald Arthur Baker Mailing Address 286 Whitworth St			Date of Receipt
		Stata	Zip Code	09 03 2010
	City Thousand Oaks	State CA	91360-1825	Transaction ID: 20100915172653-165 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		69.79
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Qu		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1326.01	
В.	Full Name (Last, First, Middle Initial) Donald Arthur Baker	1		Date of Receipt
	Mailing Address 286 Whitworth St			09 17 2010
	City Thousand Oaks	State CA	Zip Code 91360-1825	Transaction ID: 20101012151846-164
	FEC ID number of contributing federal political committee.	C	91300-1023	Amount of Each Receipt this Period 69.79
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Qu		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1326.01]
C.	Full Name (Last, First, Middle Initial) Michael J. Baughman			Date of Receipt
	Mailing Address 5343 N Lakewood Av	е		09 03 7 2010
	City Chicago	State IL	Zip Code 60640-2208	Transaction ID: 20100915172653-171 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer Baxter International Inc.	Occupation CVP, Co		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1900.00	
	SUBTOTAL of Receipts This Page (optional) .			239.58
	TOTAL This Period (last page this line number	r only)		

SCHEDULE A (FEC ITEMIZED RECEIPT	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other NAME OF COMMITTEE (In	er than using the name and ac Full)	ay not be sold or used by any pers Idress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Baxter Healthcare Politic	cal Action Committee		
Full Name (Last, First, Middle Michael J. Baughman	e Initial)		Date of Receipt
Mailing Address 5343 N I	_akewood Ave		09 17 2010
City <u>Chicago</u>	State IL	Zip Code 60640-2208	Transaction ID: 20101012151846-170 Amount of Each Receipt this Period
FEC ID number of contribution federal political committee.			100.00
Name of Employer Baxter International Inc.	Occupation CVP, Co		
Receipt For: Primary Gene Other (specify) ▼	Aggregat	e Year-to-Date ▼ 1900.00	
Full Name (Last, First, Middle Edwin A. Betancourt			Date of Receipt
Mailing Address 101 NE 3			09 03 7 2010
City	State	Zip Code	Transaction ID: 20100915172653-193
Fort Lauderdale FEC ID number of contributing federal political committee.	rg C	33301-1181	Amount of Each Receipt this Period 45.24
Name of Employer Baxter Export Corporation	Occupation VP Mfg	on Latin America	
Receipt For: Primary Gene Other (specify) ▼	Aggregat	e Year-to-Date ▼ 851.64	
Full Name (Last, First, Middle C. Edwin A. Betancourt	e Initial)		Date of Receipt
Mailing Address 101 NE 3			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Fort Lauderdale	State FL	Zip Code	Transaction ID: 20101012151846-192
FEC ID number of contribution federal political committee.		33301-1181	Amount of Each Receipt this Period 45.24
Name of Employer Baxter Export Corporation	Occupation VP Mfg	on Latin America	
Receipt For: Primary Gene Other (specify) ▼	Aggregat	e Year-to-Date ▼ 851.64	
SUBTOTAL of Receipts This F	Page (optional)		190.48
TOTAL This Period (last page		<u> </u>	

SCHEDULE A (FEC FOITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 87 (check only one) X
Any information copied from such or for commercial purposes, other of NAME OF COMMITTEE (In Fundamental Baxter Healthcare Political	han using the name and a	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle In Paulo Bolgar Mailing Address 101 NE 3rd Ste 1600 City Fort Lauderdale FEC ID number of contributing federal political committee. Name of Employer Baxter Export Corporation Receipt For: Primary Other (specify)	State FL C Occupati VP, HR Aggrega	Zip Code 33301-1181 on - Latin America te Year-to-Date ▼ 475.00	Date of Receipt M M M O D D O Z D O D Transaction ID: 20100915172653-192 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle In Paulo Bolgar Mailing Address 101 NE 3rd Ste 1600 City Fort Lauderdale FEC ID number of contributing federal political committee. Name of Employer Baxter Export Corporation Receipt For: Primary General Other (specify)	State FL C Occupati VP, HR Aggrega	Zip Code 33301-1181 on - Latin America te Year-to-Date ▼ 475.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle In David L. Bonderud Mailing Address 22294 NW City Lake Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary Genera Other (specify)	Brookside Way State IL C Occupati Preside Aggrega	Zip Code 60010-5957 on nt, US Med Delivery te Year-to-Date ▼ 380.00	Date of Receipt M M M O D D O 2 2 0 1 0 Transaction ID: 20100915172653-24 Amount of Each Receipt this Period 20.00
SUBTOTAL of Receipts This Page	e (optional)		70.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any persone name and address of any political committee to ommittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) David L. Bonderud Mailing Address 22294 NW Brookside City Lake Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	State Zip Code IL 60010-5957 C Occupation President, US Med Delivery Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 7 2 0 1 0 Transaction ID: 20101012151846-24 Amount of Each Receipt this Period 20.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Kristina (Tina) R. Borucki Mailing Address 8409 Shady Ln City Wonder Lake FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation	State Zip Code IL 60097-9490 C Occupation Business Operations Analyst	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Kristina (Tina) R. Borucki Mailing Address 8409 Shady Ln City Wonder Lake FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corpora-	Aggregate Year-to-Date ▼ 377.94 State Zip Code IL 60097-9490 C	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ SUBTOTAL of Receipts This Page (optional)	Business Operations Analyst Aggregate Year-to-Date ▼ 377.94	60.08

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 87 (check only one) X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may the name and add	v not be sold or used by any perso	n for the purpose of soliciting contributions osolicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (Committee		
Full Name (Last, First, Middle Initial) William P. Botha			Date of Receipt
Mailing Address 2225 Robinson St			0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-52
Redondo Beach	CA	90278-2019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Baxter Healthcare Corpora-	Occupatio		
tion	Plant Ma		_
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	-
Primary ☐ General Other (specify) ▼		1425.00	
Full Name (Last, First, Middle Initial) William P. Botha	1		Date of Receipt
Mailing Address 2225 Robinson St			09 17 2010
City	State	Zip Code	Transaction ID: 20101012151846-5
Redondo Beach	CA	90278-2019	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		75.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Plant Ma		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1425.00	
Full Name (Last, First, Middle Initial) John J. Bratsakis			Date of Receipt
Mailing Address 2405 Trailside Ln			0 9 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-9
Wauconda	IL	60084-5016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio BCU Sr V	n VP, Business Devlp	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		475.00	
SUBTOTAL of Receipts This Page (optional	.1)		175.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Baxter Healthcare Political Action C	ommittee	
Full Name (Last, First, Middle Initial) John J. Bratsakis		Date of Receipt
Mailing Address 2405 Trailside Ln	State Zip Code	0 9 1 7 2 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0
City Wauconda	IL 60084-5016	Transaction ID: 20101012151846-91 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation BCU Sr VP, Business Devlp	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Susan K. Brown Mailing Address 917 Geneva St		Date of Receipt
Mailing Address 917 Geneva St		09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-18
Glendale FEC ID number of contributing	CA 91207-1707	Amount of Each Receipt this Period 62.77
federal political committee.	C	02.11
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Manufacturing	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1164.79	
Full Name (Last, First, Middle Initial) Susan K. Brown		Date of Receipt
Mailing Address 917 Geneva St		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20101012151846-18
Glendale	CA 91207-1707	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.77
Name of Employer Baxter Healthcare Corpora-	Occupation VP, Manufacturing	
tion Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1164.79	
SUBTOTAL of Receipts This Page (optional)	150.54
TOTAL This Period (last page this line numb		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	FOR LINE NUMBER: PAGE 15/8/ (check only one)		
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	ng the name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meador City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For:	State IL C Occupation VP, Corp	Zip Code 60061-2572 n porate Audit	Date of Receipt M M M / D D / Y Y Y Y Y O 9 / 0 3 / 2 0 1 0 Transaction ID: 20100915172653-184 Amount of Each Receipt this Period 53.10
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Sebastian J. Bufalino Mailing Address 1091 Pine Meador	0 0	1002.06	Date of Receipt
City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State IL C Occupation VP, Corp	Zip Code 60061-2572 n oorate Audit 2 Year-to-Date ▼	0 9
Full Name (Last, First, Middle Initial) Kim C. Bush Mailing Address 7814 Crownhurst City McLean FEC ID number of contributing	State VA	Zip Code 22102-1445	Date of Receipt M M M / D D / Y Y Y Y Y 0 9 2 0 2 0 1 0 Transaction ID: B66AB6045A4DB050E Amount of Each Receipt this Period
federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation Presiden Aggregate		250.00
SUBTOTAL of Receipts This Page (option	nal)		356.20

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	and Statements may not be sold or used by any person ng the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	r Committee	
Full Name (Last, First, Middle Initial) Donna Campagna		Date of Receipt
Mailing Address 30922 Saint Andr	rews Dr	09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-40
Libertyville	IL 60048-1037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Baxter Healthcare Corpora-	Occupation	7
tion Receipt For:	VP, Information Technology	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	
Full Name (Last, First, Middle Initial) Donna Campagna	I	Date of Receipt
Mailing Address 30922 Saint Andr	rews Dr	M M / D D / Y Y Y Y Y
City	State Zip Code	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-40
<u>Libertyville</u>	IL 60048-1037	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	
Full Name (Last, First, Middle Initial) Edward K. Chess	L	Date of Receipt
Mailing Address 5313 Abbey Dr		09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-12
<u>McHenry</u>	IL 60050-5155	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Director, Research	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (option	nal)	105.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (nd Statements may not be sold or used by any persor the name and address of any political committee to s Committee	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Edward K. Chess Mailing Address 5313 Abbey Dr		Date of Receipt
City McHenry	State Zip Code IL 60050-5155	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-12 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Sr Director, Research Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Anthony Ciganek Mailing Address 233 Heath Ct		Date of Receipt 0 9 0 3 2 0 1 0
City Barrington FEC ID number of contributing federal political committee.	State Zip Code IL 60010-4822 C	Transaction ID: 20100915172653-4 Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupation Sr Director, Engineering Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Anthony Ciganek Mailing Address 233 Heath Ct		Date of Receipt
City Barrington	State Zip Code IL 60010-4822	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-4 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	Occupation Sr Director, Engineering Aggregate Year-to-Date ▼	_
Other (specify)	475.00	
SUBTOTAL of Receipts This Page (optional	al)	75.00

City State Zip Code IL 60046-6515 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. Receipt For: Primary General Other (specify) ▼ C	18 / 87 12 16
A. Pill Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial) Mailing Address 109 Juniper Way City State Zip Code Lake Villa IL 60046-6515 FEC ID number of contributing federal political committee. Name of Employer Baster Healthcare Corpora- Baster Healthcare Corpora- University Quality Qua	outions
A. Brian W. Clements Mailling Address 109 Juniper Way City Lake Villa FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code Lake Villa FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Amount of Each Receipt this I Primary General C Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Amount of Each Receipt this I Date of Receipt Transaction ID: 201000151 Amount of Each Receipt Initial Date of Receipt Transaction ID: 2010101012 Amount of Each Receipt this I Date of Receipt Transaction ID: 2010101012 Transaction ID: 2010101012 Amount of Each Receipt this I Date of Receipt Transaction ID: 2010101012 Amount of Each Receipt this I Date of Receipt Initial Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code IL Gootle-6950 Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code IL Gootle-6950 Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I	
City State Zip Code IL 60046-6515	
Lake Villa FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Other (specify) ▼ City Lake Villa FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation VP, MD Supply Chain Aggregate Year-to-Date ▼ Transaction ID: 201010121 Lake Villa FEC ID number of contributing federal Dotter (specify) ▼ City State Zip Code IL 60046-6515 Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 201009151 Amount of Each Receipt this I Date of Receipt Transaction ID: 20100915	2 0 1 0
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code Baxter Healthcare Corporation Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Part of Employer General Other (specify) ▼ Full Name (Last, First, Middle Initial) Brian W. Clements Mailing Address 109 Juniper Way City State Zip Code Baxter Healthcare Corporation VP, MD Supply Chain Name of Employer General Other (specify) ▼ Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code Date of Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code IL 60010-6950 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation VP, Government Affairs VP, Government Affairs Primary General Occupation VP, Government Affairs Primary General Occupation Primary Gen	
Name of Employer Baxter Healthcare Corporation Aggregate Year-to-Date ▼	² eriod
tion Receipt For:	15.00
Receipt For:	
Primary General 285.00	
Brian W. Clements Mailing Address 109 Juniper Way City Lake Villa FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Primary City State Zip Code IL 60046-6515 C C C C Name of Employer Baxter Healthcare Corporation VP, MD Supply Chain Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City North Barrington FEC ID number of contributing federal political committee. C C Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Transaction ID: 201010121 Amount of Each Receipt this I Date of Receipt Transaction ID: 201010121 Transaction ID: 2010101121 Transaction ID: 201010121 Transaction ID: 2010101121 Transaction ID: 20101121 Transaction ID: 201011121 Transaction ID: 20101121 Transaction ID: 201011121 Transaction ID: 201011121 Transaction ID: 201011121 Transaction ID: 20101111 Transaction ID: 20101111 Transaction ID: 20101111 Transaction ID: 20101111 Transaction ID: 201	
City State Zip Code IL 60046-6515 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Primary General Other (specify) ▼ City State Zip Code IL 60046-6515 Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code IL 60010-6950 FEC ID number of contributing federal political committee. City State Zip Code IL 60010-6950 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation VP, Government Affairs Receipt For: Aggregate Year-to-Date ▼ 10 9 1.7 Transaction ID: 201010121 Amount of Each Receipt this I Transaction ID: 201009151 Amount of Each Receipt this I Aggregate Year-to-Date ▼ 10 9 0.3 Transaction ID: 201009151 Amount of Each Receipt this I Aggregate Year-to-Date ▼	
Lake Villa Lake Villa	2010
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code IL 60010-6950 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation Occupation VP, MD Supply Chain Aggregate Year-to-Date ▼ Table of Receipt Transaction ID: 201009151 Amount of Each Receipt this II Occupation VP, Government Affairs Aggregate Year-to-Date ▼ Primary General	51846-9
Receipt For: Date of Receipt Name of Employer Baxter Healthcare Corporation	^o eriod
Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ City State Zip Code North Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation VP, MD Supply Chain Aggregate Year-to-Date ▼ Date of Receipt M M M O 9 O 3 O 3 O 2 Transaction ID: 201009151 Amount of Each Receipt this ID C Occupation VP, Government Affairs Aggregate Year-to-Date ▼ Primary General	15.00
Receipt For: Primary	
City Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code North Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary Coty State Zip Code IL 60010-6950 C Cocupation VP, Government Affairs Aggregate Year-to-Date ▼	
Sarah L. Creviston Mailing Address 23 Wynstone Way City State Zip Code North Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Date of Receipt M M M O D D O 3 2 Transaction ID: 201009151 Amount of Each Receipt this ID Occupation VP, Government Affairs	
City North Barrington FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary State Zip Code Transaction ID: 201009151 Amount of Each Receipt this I Occupation VP, Government Affairs Aggregate Year-to-Date Transaction ID: 201009151 Amount of Each Receipt this I Occupation VP, Government Affairs	
North Barrington IL 60010-6950 Amount of Each Receipt this I C Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Amount of Each Receipt this I Aggregate Year-to-Date Amount of Each Receipt this I Aggregate Year-to-Date Amount of Each Receipt this I Aggregate Year-to-Date ▼	2 0 1 0
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General C Occupation VP, Government Affairs Aggregate Year-to-Date	
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation VP, Government Affairs Aggregate Year-to-Date Occupation VP, Government Affairs	^o eriod
Baxter Healthcare Corporation Receipt For: Primary General VP, Government Affairs Aggregate Year-to-Date ▼	106.31
Receipt For: Primary General Aggregate Year-to-Date ▼	
0004 00	
SUBTOTAL of Receipts This Page (optional)	36.31
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 19 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may	l not be sold or used by any persodress of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee		
Full Name (Last, First, Middle Initial) Sarah L. Creviston			Date of Receipt
Mailing Address 23 Wynstone Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-1
North Barrington	IL	60010-6950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		106.31
Name of Employer Baxter Healthcare Corpora-	Occupation VP. Gove	n ernment Affairs	7
tion Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	.55. 554.0	2001.29	
Full Name (Last, First, Middle Initial) Margarita Cruz-casse	1		Date of Receipt
Mailing Address 153 Calle Violeta			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-2
San Juan	PR	00927-6208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		51.24
Name of Employer Baxter	Occupation Dir, Logis		
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 966.60	
Full Name (Last, First, Middle Initial) Margarita Cruz-casse			Date of Receipt
Mailing Address 153 Calle Violeta			0 9 1 7 2 0 1 0
City	State	Zip Code	Transaction ID: 20101012151846-2
San Juan	PR	00927-6208	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		51.24
Name of Employer Baxter	Occupation Dir, Logis		
Receipt For: Primary General Other (specify)	. '	Year-to-Date ▼ 966.60	
SUBTOTAL of Receipts This Page (optional)			208.79

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: PAGE 20 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16	
Any information copied from such Reports and S or for commercial purposes, other than using the	statements may e name and add	not be sold or used by any persodress of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee		
Full Name (Last, First, Middle Initial) Salvatore S. Dadouche			Date of Receipt
Mailing Address 868 Interlaken Dr			09 03 2010
City	State	Zip Code	Transaction ID: 20100915172653-25
Lake Zurich	IL	60047-1338	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora-	Occupation		7
tion Receipt For:		p, Benefits & HR Ops	_
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Salvatore S. Dadouche	1		Date of Receipt
Mailing Address 868 Interlaken Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-2
Lake Zurich	IL	60047-1338	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Com	n p, Benefits & HR Ops	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Andrea Williamson Darsey			Date of Receipt
Mailing Address 147 Gerbera St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-1
<u>Danville</u>	CA	94506-4791	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		31.63
Name of Employer Baxter Healthcare Corpora- tion	Occupation Plant Ma		
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 594.37	
SUBTOTAL of Receipts This Page (optional)			71.63

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Benorts and	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 87 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Andrea Williamson Darsey Mailing Address 147 Gerbera St		Date of Receipt
City	State Zip Code	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-106
Danville FEC ID number of contributing federal political committee.	CA 94506-4791	Amount of Each Receipt this Period 31.63
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation Plant Manager I Aggregate Year-to-Date 594.37	
Full Name (Last, First, Middle Initial) Robert M. Davis Mailing Address 21515 W Humming	bird Ct	Date of Receipt 0 9 0 3 2 0 1 0
City Kildeer FEC ID number of contributing federal political committee.	State Zip Code IL 60047-7213 C	Transaction ID: 20100915172653-172 Amount of Each Receipt this Period 173.08
Name of Employer Baxter International Inc.	Occupation CVP, Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3265.44	
Full Name (Last, First, Middle Initial) C. Robert M. Davis		Date of Receipt
Mailing Address 21515 W Humming	bird Ct	09 17 2010
City Kildeer	State Zip Code IL 60047-7213	Transaction ID: 20101012151846-171 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	173.08
Name of Employer Baxter International Inc.	Occupation CVP, Chief Financial Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3265.44	
SUBTOTAL of Receipts This Page (optional	l) >	377.79

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Sta or for commercial purposes, other than using the results of the state of	atements may	not be sold or used by any persodress of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Comi	mittee		
Full Name (Last, First, Middle Initial) Barry M. Deutsch			Date of Receipt
Mailing Address 2330 Westcourse Dr			09 03 2010
City	State	Zip Code	Transaction ID: 20100915172653-1
Riverwoods	IL	60015-1768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		44.62
Name of Employer Baxter Healthcare Corpora-	Occupatio	n siness Development	
tion Receipt For:		e Year-to-Date	
Primary General Other (specify) ▼	, iggi ogale	267.72	
Full Name (Last, First, Middle Initial) Barry M. Deutsch			Date of Receipt
Mailing Address 2330 Westcourse Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-1
Riverwoods	IL	60015-1768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		44.62
Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP I, Bus	n siness Development	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 267.72	
Full Name (Last, First, Middle Initial) Angel L. Egipciaco-Lassalle			Date of Receipt
Mailing Address 27225 Rose Mallow Ln (Fair Oaks Ranch)			09 03 7 2010
City	State	Zip Code	Transaction ID: 20100915172653-1
Canyon Country	CA	91387-6950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Plant Co		
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optional)			114.24

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 23 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	ımittee		
Full Name (Last, First, Middle Initial) Angel L. Egipciaco-Lassalle			Date of Receipt
Mailing Address 27225 Rose Mallow Ln (Fair Oaks Ranch)	ı		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-16
Canyon Country	CA	91387-6950	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		25.00
Name of Employer Baxter Healthcare Corpora-	Occupatio		
tion Receipt For:	Plant Co	e Year-to-Date	-
Primary General Other (specify) ▼	Aggregate	475.00	
Full Name (Last, First, Middle Initial) Scott A. Ehrmantraut	<u> </u>		Date of Receipt
Mailing Address 7655 168th Ave SE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-19
Mooreton	ND	58061-9741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer BioLife Plasma L.L.C.	Occupatio Director,	n Operations	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Scott A. Ehrmantraut			Date of Receipt
Mailing Address 7655 168th Ave SE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-1
Mooreton	ND	58061-9741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		50.00
Name of Employer BioLife Plasma L.L.C.	Occupatio Director,	n Operations	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (optional)		0 0 0 0 0 0 0	125.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 87 (check only one) X 11a 11b 11c 12
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Baxter Healthcare Political Action	Committee	
Full Name (Last, First, Middle Initial) Paul D. Estrem		Date of Receipt
Mailing Address 325 Clarewood Ci	State Zip Code	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-49
Grayslake	IL 60030-3468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Fin & Strat Initiatives	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Paul D. Estrem		Date of Receipt
Mailing Address 325 Clarewood Ci	r	09 17 2010
City	State Zip Code	Transaction ID: 20101012151846-49
Grayslake	IL 60030-3468	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Fin & Strat Initiatives	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	950.00	
Full Name (Last, First, Middle Initial) Peter Etienne		Date of Receipt
Mailing Address 189 Lions Ct		09 03 7 2010
City Lake Zurich	State Zip Code IL 60047-7012	Transaction ID: 20100915172653-17 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation Sr Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (option	nal)	125.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	Statements may not be sold or used by any person e name and address of any political committee to mmittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Peter Etienne Mailing Address 189 Lions Ct City Lake Zurich FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60047-7012 C Occupation Sr Counsel Aggregate Year-to-Date 475.00	Date of Receipt M
Full Name (Last, First, Middle Initial) Camille I. Farhat Mailing Address 1052 Warrington Rd City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60015-3344 C Occupation GM, BPT Aggregate Year-to-Date 950.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Camille I. Farhat Mailing Address 1052 Warrington Rd City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60015-3344 C Occupation GM, BPT Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 87 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and add	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Carlos M. Flores Mailing Address 1601 Marinero Pl City	State	Zip Code	Date of Receipt 0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-107
Oxnard FEC ID number of contributing federal political committee.	CA	93030-2568	Amount of Each Receipt this Period 12.50
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼		n pal Engineer e Year-to-Date ▼ 237.50	
Full Name (Last, First, Middle Initial) Carlos M. Flores Mailing Address 1601 Marinero PI	1		Date of Receipt 0 9 1 7 2 0 1 0
City Oxnard FEC ID number of contributing	State CA	Zip Code 93030-2568	Transaction ID: 20101012151846-107 Amount of Each Receipt this Period 12.50
Receipt For: Primary Other (specify) ▼	Occupatio Sr Princi	n pal Engineer e Year-to-Date ▼ 237.50]
Full Name (Last, First, Middle Initial) Alan E. Freedlund Mailing Address 746 S River Rd			Date of Receipt
City Naperville FEC ID number of contributing federal political committee.	State IL	Zip Code 60540-6333	Transaction ID: 20100915172653-84 Amount of Each Receipt this Period 12.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	- ' '	rmation Technology e Year-to-Date ▼ 228.00	
SUBTOTAL of Receipts This Page (optional	ı)		37.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Ai	ny information copied from such Reports and for commercial purposes, other than using th	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	mmittee	
. ∠ \.	Full Name (Last, First, Middle Initial) Alan E. Freedlund		Date of Receipt
	Mailing Address 746 S River Rd		09 17 2010
	City	State Zip Code IL 60540-6333	Transaction ID: 20101012151846-84
	Naperville FEC ID number of contributing federal political committee.	IL 60540-6333	Amount of Each Receipt this Period 12.00
	Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation VP, Information Technology Aggregate Year-to-Date 228.00	
- 3.	Full Name (Last, First, Middle Initial) Kevin E. Freeman Mailing Address 20982 N Buffalo Run	1	Date of Receipt
	City	State Zip Code	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-34
	Kildeer	IL 60047-8534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, I Finance	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 475.00	
_	Full Name (Last, First, Middle Initial) Kevin E. Freeman	1	Date of Receipt
	Mailing Address 20982 N Buffalo Run		0 9 1 7 Y Y Y Y Y
	City	State Zip Code	Transaction ID: 20101012151846-34
	Kildeer FEC ID number of contributing federal political committee.	IL 60047-8534	Amount of Each Receipt this Period 25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, I Finance	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 475.00	
Г	NIDTOTAL (Consider This Days (continue))		62.00

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28/8/ (check only one)			
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (Committee					
Full Name (Last, First, Middle Initial) Guy G. Fusco			Date of Receipt			
Mailing Address PO Box 747	•					
City Deerfield	State IL	Zip Code 60015-0747	Transaction ID: 20100915172653-188 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		20.00			
Name of Employer Baxter World Trade Corpor- ation Receipt For:		Assignment Year-to-Date				
Primary General Other (specify) ▼	Aggregate	380.00				
Full Name (Last, First, Middle Initial) Guy G. Fusco			Date of Receipt			
Mailing Address PO Box 747 Baxter Expatriate A	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Deerfield	State IL	Zip Code 60015-0747	Transaction ID: 20101012151846-18 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		20.00			
Name of Employer Baxter World Trade Corpor- ation	Occupation Away on	n Assignment				
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 380.00				
Full Name (Last, First, Middle Initial) Valery E. Gallagher			Date of Receipt			
Mailing Address 14334 Spring Mead	M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O					
City Libertyville	State IL	Zip Code 60048-2490	Transaction ID: 20100915172653-75 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		76.92			
Name of Employer Baxter Healthcare Corpora- tion	'	e Government Affairs				
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1431.54]			
SUBTOTAL of Receipts This Page (options	al)		116.92			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	mittee	
Full Name (Last, First, Middle Initial) Valery E. Gallagher		Date of Receipt
Mailing Address 14334 Spring Meadow	Ct	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20101012151846-75
<u>Libertyville</u>	IL 60048-2490	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.92
Name of Employer Baxter Healthcare Corpora-	Occupation Dir, State Government Affairs	
tion Receipt For:	Aggregate Year-to-Date ▼	-
Primary General Other (specify) ▼	1431.54	
Full Name (Last, First, Middle Initial) Erin M. Gardiner		Date of Receipt
Mailing Address 2442 W Carmen Ave		0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20100915172653-173
<u>Chicago</u>	IL 60625-2606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation Dir, Communications	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Erin M. Gardiner		Date of Receipt
Mailing Address 2442 W Carmen Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20101012151846-172
Chicago	IL 60625-2606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation Dir, Communications	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	
SUBTOTAL of Receipts This Page (optional)		126.92
SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number of	·	126.92

Any information expired from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Pull Name (Last, First, Middle Initial) Baster Healthcare Political Action Committee Full Name (Last, First, Middle Initial) James M. Galfing Mailing Address 391 Sherbrooke Ct City State Zip Code IL So012-3705 Amount of Each Receipt the Period Political Committee Coupsilon CVP, Global Manufacturing Ops Receipt For: Primary General	SCHEDULE A (FEC F ITEMIZED RECEIPTS	orm 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 87 (check only one) X 11a
Baxter Healthcare Political Action Committee Full Name (Last, First, Middle Initial) James M. Gailing Mailing Address 391 Sherbrooke Ct City State L Sol12:3705 FEC ID number of contributing Transaction ID: 20100915172653-16 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) James M. Gailing Mailing Address 391 Sherbrooke Ct City State L State Zip Code LL Sol12:3705 Full Name (Last, First, Middle Initial) James M. Gailing Mailing Address 391 Sherbrooke Ct City State Zip Code LL Sol12:3705 FEC ID number of contributing federal political committee. C Crystal Lake LL Sol12:3705 FEC ID number of contributing federal political committee. C Crystal Lake FEC ID number of contributing federal political committee. C C Date of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C Date of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Amount of Each Receipt this Period Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Transaction ID: 20101012151846-16 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. C C City State Zip Code Aggregate Year-to-Date Transaction ID: 2010101515172653-63 Amount of Each Receipt this Period Transaction ID: 2010101515172653-63 Amount of Each Receipt this Period Transaction ID: 2010101515172653-63 Amount of Each Receipt Tr	Any information copied from such or for commercial purposes, other	Reports and Statements mathranger than using the name and additional states and states are states and states and states are states and states and states are states are states and states are states are states and states are states a	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mailing Address 391 Sherbrooke Ct City City State Zip Code Lit 60012:3705 FEC ID number of contributing federal political committee. Coverage Lake City State Zip Code Lit 60012:3705 FEC ID number of contributing federal political committee. Coverage State Zip Code City State Zip	1	,		
City	•	nitial)		Date of Receipt
Crystal Lake EC D number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation. CVP, Global Manufacturing Ops.		rooke Ct		M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer Barder Healthcare Corporation CVP, Global Manufacturing Ops	City	State	Zip Code	Transaction ID: 20100915172653-16
Name of Employer Batter Healthcare Corporation CVP, Global Manufacturing Ops	Crystal Lake	IL	60012-3705	Amount of Each Receipt this Period
CVP, Global Manufacturing Ops Aggregate Year-to-Date ▼		C		160.38
Receipt For:		'		
Tell Name (Last, First, Middle Initial) James M. Catling Mailing Address 391 Sherbrooke Ct City Crystal Lake IL 60012-3705 FEC ID number of contributing federal political committee. CVP, Global Manufacturing Ops Baxter Healthcare Corpora- ION Receipt For: Primary General Other (specify) ▼ Occupation CVP, Global Manufacturing Ops Mailing Address 3775 Riverly Trce City State Zip Code IL 60012-3705 CVP, Global Manufacturing Ops Aggregate Year-to-Date ▼ Oate of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 20101012151846-16 Amount of Each Receipt this Period Date of Receipt Transaction ID: 2010015178653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Transaction ID: 20100915172653-63 Amount of Each Receipt this Period				
James M. Gatling Mailing Address 391 Sherbrooke Ct				
City State Zip Code IL 60012-3705		nitial)		Date of Receipt
Crystal Lake IL 60012-3705 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation CVP, Global Manufacturing Ops Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ City State Zip Code Marietta GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 1036.62	Mailing Address 391 Sherb	rooke Ct		
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ State Zip Code GA 30067-4241 FEC ID number of contributing federal political committee. CITY State Zip Code GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 160.38 160.38 160.38 160.38 160.38 Date of Receipt 17	•		Zip Code	Transaction ID: 20101012151846-16
Name of Employer Baxter Healthcare Corpora- tion Receipt For:		<u> L</u>	60012-3705	Amount of Each Receipt this Period
Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Arthur J. Gibson Mailing Address 3775 Riverly Trce City State Zip Code GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 20100915172653-63 Amount of Each Receipt this Period C S55.20		C		160.38
Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Arthur J. Gibson Mailing Address 3775 Riverly Trce City State Zip Code Marietta GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 20100915172653-63 Amount of Each Receipt this Period Toccupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 1036.62	Baxter Healthcare Corpora-	·		
Tull Name (Last, First, Middle Initial) Arthur J. Gibson Mailing Address 3775 Riverly Trce City State Zip Code Marietta GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 20100915172653-63 Amount of Each Receipt this Period S55.20	Receipt For:		e Year-to-Date ▼	
Arthur J. Gibson Mailing Address 3775 Riverly Trce City State Zip Code Marietta GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			3031.86	
City Marietta State Zip Code GA 30067-4241 FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Oscupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 1036.62	, , ,	nitial)		Date of Receipt
Marietta GA 30067-4241 Amount of Each Receipt this Period C S55.20 Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 55.20 Aggregate Year-to-Date ▼ 1036.62	Mailing Address 3775 Rive	ly Trce		
FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) Occupation VP, Environ, Health & Safety Aggregate Year-to-Date 1036.62	· · · · · · · · · · · · · · · · · · ·		·	
Name of Employer Baxter Healthcare Corporation Receipt For: Primary Other (specify) ▼ Occupation VP, Environ, Health & Safety Aggregate Year-to-Date ▼ 1036.62		GA	30067-4241	Amount of Each Receipt this Period
Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1036.62		C		55.20
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1036.62				
Other (specify) ▼ 1036.62	Receipt For:	Aggregate	•	
SUBTOTAL of Receipts This Page (optional)			1036.62	
ODFIGIAL OF Hedelpto Tillo Lage (optional)	SURTOTAL of Receipts This Po	re (ontional)		375.96
	SUBTUTAL OF RECEIPTS THIS PA	уе (оршонаг)		

ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 8 / (check only one)			
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (
Full Name (Last, First, Middle Initial) Arthur J. Gibson			Date of Receipt			
Mailing Address 3775 Riverly Trce						
City <u>Marietta</u>	State GA	Zip Code 30067-4241	0 9 1 7 2 0 1 0			
FEC ID number of contributing federal political committee.	C		55.20			
Name of Employer Baxter Healthcare Corpora- tion	Occupatio VP, Envi	n ron, Health & Safety				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1036.62				
Full Name (Last, First, Middle Initial) Susan C. Gould	Date of Receipt					
Mailing Address 760 Oakwood Ave	M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Lake Forest	State IL	Zip Code 60045-1805	Transaction ID: 20100915172653-11 Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		50.00			
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Sr Dir, C	n Iinical Development				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00				
Full Name (Last, First, Middle Initial) Susan C. Gould			Date of Receipt			
Mailing Address 760 Oakwood Ave	0 9 1 7 2 0 1 0					
City	State	Zip Code	Transaction ID: 20101012151846-1			
Lake Forest FEC ID number of contributing federal political committee.	C	60045-1805	Amount of Each Receipt this Period 50.00			
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Sr Dir, C	n linical Development				
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00				
SUBTOTAL of Receipts This Page (options	-0		155.20			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) A. William J. Gresham		Date of Receipt
Mailing Address 909 Clinton Pl		0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City River Forest	State Zip Code IL 60305-1503	Transaction ID: 20100915172653-185 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter International Inc.	Occupation Dir, Ethics & Compliance/EHS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) William J. Gresham		Date of Receipt
Mailing Address 909 Clinton Pl		09 17 2010
City River Forest	State Zip Code IL 60305-1503	Transaction ID: 20101012151846-184
FEC ID number of contributing federal political committee.	IL 60305-1503	Amount of Each Receipt this Period 25.00
Name of Employer Baxter International Inc.	Occupation Dir, Ethics & Compliance/EHS	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Lawrence P. Guiheen	.1	Date of Receipt
Mailing Address 1653 Vista Oaks Wa	у	0 9 0 3 Y Y Y Y Y
City	State Zip Code	Transaction ID: 20100915172653-6
Westlake Village FEC ID number of contributing federal political committee.	CA 91361-1549	Amount of Each Receipt this Period 35.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation President, BioPharmaceuticals	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 805.00	
SUBTOTAL of Receipts This Page (optional)		85.00
TOTAL This Period (last page this line number	<u> </u>	

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 87 (check only one) X
4	ny information copied from such Reports and r for commercial purposes, other than using th	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col	mmittee		
∠ 4 .	Full Name (Last, First, Middle Initial) Lawrence P. Guiheen			Date of Receipt
	Mailing Address 1653 Vista Oaks Way			09 17 2010
	City Westlake Village	State CA	Zip Code 91361-1549	Transaction ID: 20101012151846-6 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	31001 1343	35.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Presiden	n t, BioPharmaceuticals	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 805.00	
_ 3.	Full Name (Last, First, Middle Initial) Andrew C. Hayes			Date of Receipt
	Mailing Address 1620 Timber Woods I	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
	City	State	Zip Code	Transaction ID: 20100915172653-92
	Libertyville FEC ID number of contributing federal political committee.	C	60048-4269	Amount of Each Receipt this Period 65.77
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Direct	n or, New Product Intro	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1240.33	
- ;.	Full Name (Last, First, Middle Initial) Andrew C. Hayes			Date of Receipt
	Mailing Address 1620 Timber Woods I	0 9 1 7 2 0 1 0		
	City	State	Zip Code	Transaction ID: 20101012151846-92
	Libertyville FEC ID number of contributing federal political committee.	C	60048-4269	Amount of Each Receipt this Period 65.77
	Name of Employer Baxter Healthcare Corpora- tion	Occupatio Sr Direct	n or, New Product Intro	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1240.33	
Γ	SUBTOTAL of Receipts This Page (optional) .	1		166.54

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	nd Statements may not be sold or used by any person g the name and address of any political committee to s	for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Leslie J. Herzog Mailing Address 816 Moseley Rd		Date of Receipt
City Highland Park FEC ID number of contributing	State Zip Code IL 60035-4636	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-124 Amount of Each Receipt this Period 32.45
Receipt For: Primary General General General	Occupation Dir, Clinical Data Mgmt Aggregate Year-to-Date 611.99	
Full Name (Last, First, Middle Initial) Leslie J. Herzog Mailing Address 816 Moseley Rd		Date of Receipt 0 9 1 7 2 0 1 0
City Highland Park FEC ID number of contributing federal political committee.	State Zip Code IL 60035-4636 C	Transaction ID: 20101012151846-124 Amount of Each Receipt this Period 32.45
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Dir, Clinical Data Mgmt Aggregate Year-to-Date ▼ 611.99	
Full Name (Last, First, Middle Initial) Michael T. Himes Mailing Address 634 S Euclid Ave		Date of Receipt
City Elmhurst FEC ID number of contributing federal political committee.	State Zip Code IL 60126-4336	0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-198 Amount of Each Receipt this Period 11.22
Name of Employer BioLife Plasma L.L.C.	Occupation Quality Assoc II	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 211.62	
SUBTOTAL of Receipts This Page (option	al)	76.12

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 87 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col	e name and addre	ot be sold or used by any perso ss of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael T. Himes Mailing Address 634 S Euclid Ave			Date of Receipt
City Elmhurst FEC ID number of contributing	State IL	Zip Code 60126-4336	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-198 Amount of Each Receipt this Period
federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General	Occupation Quality Ass Aggregate Yo	oc II ear-to-Date ▼	11.22
Other (specify) ▼ Full Name (Last, First, Middle Initial) Robert J. Hombach Mailing Address 126 Homewood Ave	0 0 0	211.02	Date of Receipt 0 9 0 3 2 0 1 0
City <u>Libertyville</u> FEC ID number of contributing federal political committee.	State IL C	Zip Code 60048-2122	Transaction ID: 20100915172653-170 Amount of Each Receipt this Period 25.00
Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼	Occupation CVP, Treas Aggregate Yo	ear-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Robert J. Hombach Mailing Address 126 Homewood Ave			Date of Receipt
City <u>Libertyville</u> FEC ID number of contributing federal political committee.	State IL	Zip Code 60048-2122	0 9 1 7 2 0 1 0
Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼	Occupation CVP, Treas	surer ear-to-Date ▼ 475.00	1
SUBTOTAL of Receipts This Page (optional) .			61.22

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and Stor for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee		
Full Name (Last, First, Middle Initial) Gary W. Inglese			Date of Receipt
Mailing Address 9321 Waterside Ct			09 03 7 9 10
City	State	Zip Code	Transaction ID: 20100915172653-7
New Haven	IN	46774-2727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora-	Occupation	n thcare Reimb	
tion Receipt For:		Year-to-Date ▼	_
Primary General Other (specify) ▼	1.59.59410	380.00	
Full Name (Last, First, Middle Initial) Gary W. Inglese	Date of Receipt		
Mailing Address 9321 Waterside Ct	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 20101012151846-7
New Haven	IN	46774-2727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Heal	n thcare Reimb	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Irene P. Jakimcius			Date of Receipt
Mailing Address 2208 Wesley Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-1
Evanston	IL	60201-2648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			83.63
Name of Employer Baxter International Inc.	Occupation Assoc G	n eneral Counsel	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1579.13	
SUBTOTAL of Receipts This Page (optional)			123.63

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE I (check only X 11a 13	
Any informati or for comme	ion copied from such Reports and sercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpo solicit contribu	ose of soliciting contributions utions from such committee.
1 \	F COMMITTEE (In Full) Healthcare Political Action Cor	mmittee			
Full Name A. Irene P. Ja	e (Last, First, Middle Initial) akimcius			Date of I	Receipt
	ddress 2208 Wesley Ave			0 9	17 2010
City Evansto	n	State IL	Zip Code 60201-2648		tion ID: 20101012151846-175 of Each Receipt this Period
FEC ID no	umber of contributing litical committee.	C		Amount	83.63
Name of E Baxter Int	Employer ernational Inc.	Occupatio Assoc G	n eneral Counsel		
	or: nary General er (specify) ▼	- '	e Year-to-Date ▼ 1579.13		
B. Michael T.				Date of I	Receipt
Mailing Ad	ddress 130 W Lincoln Ave			0 9	03 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code		tion ID: 20100915172653-154
<u>Libertyv</u>		IL	60048-2721	Amount	of Each Receipt this Period
	umber of contributing slitical committee.	C			39.42
Name of E Baxter He tion	Employer ealthcare Corpora-	Occupatio Sr Dir, S	n trategy & Integration		
	or: nary General er (specify) ▼	Aggregate	e Year-to-Date ▼ 743.22		
Full Name C. Michael T.	e (Last, First, Middle Initial) Jennings			Date of I	Receipt
Mailing Ad	ddress 130 W Lincoln Ave			0 9	17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	91.	State	Zip Code		tion ID: 20101012151846-153
	IIIE umber of contributing litical committee.	C	60048-2721	Amount	of Each Receipt this Period 39.42
Name of E Baxter He tion	Employer ealthcare Corpora-	Occupatio Sr Dir. S	n trategy & Integration		
Receipt F			e Year-to-Date ▼		
	nary General er (specify) ▼		743.22		
SUBTOTAL	of Receipts This Page (optional) .				162.47
	s Period (last page this line number		<u> </u>		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	for each of	arate schedule(s) category of the Summary Page	(check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than usin	nd Statements may not be sold g the name and address of any p	or used by any perso political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action	Committee		
Full Name (Last, First, Middle Initial) Kurt Johnson			Date of Receipt
Mailing Address 2322 Central Park	Ave		M M / D D / Y Y Y Y Y Y O D D / 2010
City Evanston	State Zip Cod IL 60201-		Transaction ID: 20100915172653-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Bus Plan & Dev	/ & Admin Ldr	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	380.00	
Full Name (Last, First, Middle Initial) Kurt Johnson	'		Date of Receipt
Mailing Address 2322 Central Park	Ave		M M / D D / Y Y Y Y Y O D D / 2010
City Evanston	State Zip Cod IL 60201-		Transaction ID: 20101012151846-16 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Bus Plan & Dev	/ & Admin Ldr	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	380.00	
Full Name (Last, First, Middle Initial) Robert A. Johnson			Date of Receipt
Mailing Address 31385 W Somerse	t Cir		M M / D D / Y Y Y Y O O O O O O O O O O O O O O O
City Libertyville	State Zip Cod IL 60048-		Transaction ID: 20100915172653-48 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	4000	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Manufacturing	g	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	e ▼ 475.00	
SUBTOTAL of Receipts This Page (option	al)		65.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Com	nmittee		
۸.	Full Name (Last, First, Middle Initial) Robert A. Johnson			Date of Receipt
	Mailing Address 31385 W Somerset Cir	r		09 / 17 / Y Y Y Y
	City <u>Libertyville</u>	State IL	Zip Code 60048-4886	Transaction ID: 20101012151846-48 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Ma	n anufacturing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 475.00	
	Full Name (Last, First, Middle Initial) Robert C. Keeley	<u> </u>		Date of Receipt
	Mailing Address 22606 N Bridle Trl			09 03 2010
	City	State	Zip Code	Transaction ID: 20100915172653-134
	Kildeer FEC ID number of contributing federal political committee.	C	60047-1800	Amount of Each Receipt this Period 50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HD/0	n CRRT Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00]
	Full Name (Last, First, Middle Initial) Robert C. Keeley			Date of Receipt
	Mailing Address 22606 N Bridle Trl			09 17 2010
	City	State	Zip Code	Transaction ID: 20101012151846-133
	Kildeer FEC ID number of contributing federal political committee.	C	60047-1800	Amount of Each Receipt this Period 50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HD/0	n CRRT Marketing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00]
S	BUBTOTAL of Receipts This Page (optional)			125.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	Statements may not be sold or used by any personal ename and address of any political committee to mmittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jane E. Kiernan Mailing Address 525 W Roscoe St Apt 3W City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60657-3540 C Occupation GM, IV Therapy Aggregate Year-to-Date ▼ 760.00	Date of Receipt M M M / D D / Y Y Y Y Y 0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-38 Amount of Each Receipt this Period 40.00
Full Name (Last, First, Middle Initial) Jane E. Kiernan Mailing Address 525 W Roscoe St Apt 3W City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60657-3540 C Occupation GM, IV Therapy Aggregate Year-to-Date 760.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Richard L. Kirkendall Mailing Address 1 Baxter Pkwy City Deerfield FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60015-4625 C Occupation VP Quality, Medication Delivery Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y O 9
SUBTOTAL of Receipts This Page (optional) .		155.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 87 (check only one) X 11a
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Richard L. Kirkendall			Date of Receipt
•	Mailing Address 1 Baxter Pkwy			0 9 1 7 Y Y Y Y Y
	City Deerfield	State IL	Zip Code 60015-4625	Transaction ID: 20101012151846-136 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		75.00
	Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼		ty,Medication Delivery Year-to-Date ▼ 1425.00	
	Full Name (Last, First, Middle Initial) Marie G. Kissel			Date of Receipt
	Mailing Address 1 Baxter Pkwy C/O Gerald Lema			09 03 7 2010
	City	State	Zip Code	Transaction ID: 20100915172653-190
	Deerfield FEC ID number of contributing federal political committee.	C	60015-4625	Amount of Each Receipt this Period 77.99
	Name of Employer Baxter World Trade Corpor- ation	Occupation Away on	n Assignment	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1472.63	
. -	Full Name (Last, First, Middle Initial) Marie G. Kissel			Date of Receipt
	Mailing Address 1 Baxter Pkwy C/O Gerald Lema			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Deerfield	State IL	Zip Code	Transaction ID: 20101012151846-189
	FEC ID number of contributing federal political committee.	C	60015-4625	Amount of Each Receipt this Period 77.99
	Name of Employer Baxter World Trade Corpor- ation	Occupation Away on	n Assignment	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1472.63	
Ţ,	SUBTOTAL of Receipts This Page (optional)	1		230.98

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	Statements may not be sold or used by any persole name and address of any political committee to mmittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Helena M. Klumpp Mailing Address 2308 Isabella St City Evanston FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60201-1405 C Occupation Senior Tax Counsel Aggregate Year-to-Date 380.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Helena M. Klumpp Mailing Address 2308 Isabella St City Evanston FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60201-1405 C Occupation Senior Tax Counsel Aggregate Year-to-Date 380.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Brian J. LaMarca Mailing Address 2261 Zach Scott St City Austin FEC ID number of contributing federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify)	State Zip Code TX 78723-5463 C Occupation Regional Operations Manager Aggregate Year-to-Date ▼ 476.78	Date of Receipt M M / D D / Y Y Y Y Y O 9
SUBTOTAL of Receipts This Page (optional) .	· • • • • • • • • • • • • • • • • • • •	65.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Brian J. LaMarca		Date of Receipt
Mailing Address 2261 Zach Scott St		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Austin	State Zip Code TX 78723-5463	Transaction ID: 20101012151846-196
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.28
Name of Employer BioLife Plasma L.L.C.	Occupation Regional Operations Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 476.78	
Full Name (Last, First, Middle Initial) Edward (Ted) A. Langan		Date of Receipt
Mailing Address 450 E Waterside Dr Unit 1702		09 03 7 2010
City	State Zip Code	Transaction ID: 20100915172653-2
Chicago	IL 60601-4719	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	75.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1425.00	
Full Name (Last, First, Middle Initial) Edward (Ted) A. Langan		Date of Receipt
Mailing Address 450 E Waterside Dr Unit 1702		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chicago	State Zip Code IL 60601-4719	Transaction ID: 20101012151846-2
FEC ID number of contributing federal political committee.	C 60601-4719	Amount of Each Receipt this Period 75.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Sales	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1425.00	
SUBTOTAL of Receipts This Page (optional)		175.28
TOTAL This Period (last page this line number	· ·	

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedu for each category of t Detailed Summary Pa	he (crieck offly offe)
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or used by a name and address of any political com	any person for the purpose of soliciting contributions mittee to solicit contributions from such committee.
Baxter Healthcare Political Action Con	mittee	
Full Name (Last, First, Middle Initial) Betty D. Larson		Date of Receipt
Mailing Address 21334 N Andover Rd		09 / 03 / 2010
City <u>Kildeer</u>	State Zip Code IL 60047-8622	Transaction ID: 20100915172653-13 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR - Renal	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 457	.60
Full Name (Last, First, Middle Initial) Betty D. Larson		Date of Receipt
Mailing Address 21334 N Andover Rd		0 9 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 20101012151846-13
Kildeer FEO ID and the street of the street	IL 60047-8622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	41.60
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, HR - Renal	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	457	.60
Full Name (Last, First, Middle Initial) Timothy P. Lawrence		Date of Receipt
Mailing Address 876 E Writer Ct		09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-14
Vernon Hills FEC ID number of contributing	IL 60061-2302	Amount of Each Receipt this Period
federal political committee.	C	60.71
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP Manufacturing Med Delive	ry
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1137	.83
SUBTOTAL of Receipts This Page (optional)		143.91

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any persone name and address of any political committee to ommittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Timothy P. Lawrence Mailing Address 876 E Writer Ct City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60061-2302 C Occupation VP Manufacturing Med Delivery Aggregate Year-to-Date 1137.83	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 Vincent Ct City Lake Bluff FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60044-2758 C Occupation VP I, Marketing Aggregate Year-to-Date 475.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jacopo Leonardi Mailing Address 319 Vincent Ct City Lake Bluff FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60044-2758 C Occupation VP I, Marketing Aggregate Year-to-Date 475.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	110.71

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 87 (check only one) X 11a
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	Statements may not be sold or used by any personal ename and address of any political committee to mmittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Josephine M. Li-McLeod Mailing Address 758 Cranmont Ct City Simi Valley FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 93065-7075 C Occupation Sr Director Outcomes Research Aggregate Year-to-Date 250.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 20100915172653-35 Amount of Each Receipt this Period 25.00
Full Name (Last, First, Middle Initial) Josephine M. Li-McLeod Mailing Address 758 Cranmont Ct City Simi Valley FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 93065-7075 C Occupation Sr Director Outcomes Research Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ray J. Linder Mailing Address 246 Montclair Rd City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60061-2934 C Occupation VP, HR - Mfg/Supply Chain Aggregate Year-to-Date 948.16	Date of Receipt M M M / D D / Y Y Y Y Y 0 9 0 3 2 0 1 0 Transaction ID: 20100915172653-44 Amount of Each Receipt this Period 47.80
SUBTOTAL of Receipts This Page (optional) .		97.80

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any persone name and address of any political committee to emmittee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ray J. Linder Mailing Address 246 Montclair Rd City Vernon Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60061-2934 C Occupation VP, HR - Mfg/Supply Chain Aggregate Year-to-Date 948.16	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1694 Falling Star Ave City Westlake Village FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 91362-5275 C Occupation VPGM BioTherapeutic & Regn Med Aggregate Year-to-Date 950.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ronald K. Lloyd Mailing Address 1694 Falling Star Ave City Westlake Village FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 91362-5275 C Occupation VPGM BioTherapeutic & Regn Med Aggregate Year-to-Date 950.00	Date of Receipt M M M / D D / Y Y Y Y Y Transaction ID: 20101012151846-42 Amount of Each Receipt this Period 50.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	147.80

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 87 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any pers to name and address of any political committee to mmittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Marcus A. Luna Mailing Address 11 Heath Pkwy City Middletown FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code NJ 07748-1718 C Occupation Sales Representative II Aggregate Year-to-Date 285.00	Date of Receipt M M M O O O O O O O O O O O O O O O O
Full Name (Last, First, Middle Initial) Marcus A. Luna Mailing Address 11 Heath Pkwy City Middletown FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code NJ 07748-1718 C Occupation Sales Representative II Aggregate Year-to-Date 285.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Matthew A. Lykken Mailing Address 421 N Wheaton Ave City Wheaton FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60187-4128 C Occupation VP, Tax Aggregate Year-to-Date ▼ 475.00	Date of Receipt M M M O D D O 2010 Transaction ID: 20100915172653-183 Amount of Each Receipt this Period 25.00
SUBTOTAL of Receipts This Page (optional)		55.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 87 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Matthew A. Lykken Mailing Address 421 N Wheaton Ave		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Wheaton FEC ID number of contributing	State Zip Code IL 60187-4128	Transaction ID: 20101012151846-182 Amount of Each Receipt this Period 25.00
Receipt For: Primary Other (specify) General Other (specify) General	Occupation VP, Tax Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Ave	NE	Date of Receipt M M
City Washington FEC ID number of contributing federal political committee.	State Zip Code DC 20002-6426	Transaction ID: 20100915172653-135 Amount of Each Receipt this Period 30.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ▼ 570.00	
Full Name (Last, First, Middle Initial) Jack Maniko Mailing Address 116 Tennessee Ave	NE	Date of Receipt
City Washington FEC ID number of contributing federal political committee.	State Zip Code DC 20002-6426	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-134 Amount of Each Receipt this Period 30.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupation Dir, Fed Legislative Affairs Aggregate Year-to-Date ▼ 570.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>	85.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	Statements may not be sold or used by any personal committee to any political committee to mailtee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Cir City Village Of Lakewoo FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60014-4852 C Occupation VP I, Mfg Strategic Planning Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Michael E. Martin Mailing Address 10680 Red Leaf Cir City Village Of Lakewoo FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60014-4852 C Occupation VP I, Mfg Strategic Planning Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeanne K. Mason Mailing Address 1760 Duffy Ln City Bannockburn FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60015-1512 C Occupation CVP, Human Resources Aggregate Year-to-Date 3308.08	Date of Receipt M
SUBTOTAL of Receipts This Page (optional) .		335.56

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Columnia	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
ر 4.	Full Name (Last, First, Middle Initial) Jeanne K. Mason			Date of Receipt
	Mailing Address 1760 Duffy Ln City	State	Zip Code	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-178
	Bannockburn	IL	60015-1512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		175.00
	Name of Employer Baxter International Inc.	Occupation CVP, Hu	n Iman Resources	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 3308.08	
- В.	Full Name (Last, First, Middle Initial) Michael J. McAndrew Mailing Address 795 Foxmoor Ln			Date of Receipt
	793 T 0XIII 001 EII			09 03 2010
	City	State	Zip Code	Transaction ID: 20100915172653-105
	Lake Zurich FEC ID number of contributing federal political committee.	C	60047-2787	Amount of Each Receipt this Period 36.54
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Qua		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 689.10	
- C.	Full Name (Last, First, Middle Initial) Michael J. McAndrew			Date of Receipt
	Mailing Address 795 Foxmoor Ln			09 17 2010
	City	State	Zip Code	Transaction ID: 20101012151846-105
	Lake Zurich FEC ID number of contributing federal political committee.	C	60047-2787	Amount of Each Receipt this Period 36.54
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Qua	lity	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 689.10	
	SUBTOTAL of Receipts This Page (optional) .			248.08
Ţ	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Daniel S. McRae		Date of Receipt
Mailing Address 2965 Redding Rd NE	Chate 7'm Ocale	0 9 0 3 2 0 1 0 0 1
City <u>Atlanta</u>	State Zip Code GA 30319-2911	Transaction ID: 20100915172653-64 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation IV Therapy Sales Representativ	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) Daniel S. McRae		Date of Receipt
Mailing Address 2965 Redding Rd NE		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20101012151846-64
Atlanta FEC ID number of contributing federal political committee.	GA 30319-2911	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation IV Therapy Sales Representativ	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	
Full Name (Last, First, Middle Initial) John K. McVey	<u>I</u>	Date of Receipt
Mailing Address 6320 Longwood Rd		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Libertyville	State Zip Code IL 60048-9447	Transaction ID: 20100915172653-194 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer BioLife Plasma L.L.C.	Occupation Sr Dir, Reg Affairs & Quality	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optional)		75.00
TOTAL This Period (last page this line number	· · · · · · · · · · · · · · · · · · ·	

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	nmittee	
∠ A.	Full Name (Last, First, Middle Initial) John K. McVey		Date of Receipt
-	Mailing Address 6320 Longwood Rd		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Libertyville	State Zip Code IL 60048-9447	Transaction ID: 20101012151846-193 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	25.00
	Name of Employer BioLife Plasma L.L.C.	Occupation Sr Dir, Reg Affairs & Quality	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 475.00	
— В.	Full Name (Last, First, Middle Initial) Kelli Mills Lester		Date of Receipt
	Mailing Address 3140 Creswell Dr		09 03 7 2010
	City	State Zip Code	Transaction ID: 20100915172653-120
	Falls Church FEC ID number of contributing federal political committee.	VA 22044-1704	Amount of Each Receipt this Period 40.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Renal Federal Leg Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	
_ c.	Full Name (Last, First, Middle Initial) Kelli Mills Lester	<u> </u>	Date of Receipt
	Mailing Address 3140 Creswell Dr		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 20101012151846-120
	Falls Church FEC ID number of contributing federal political committee.	VA 22044-1704	Amount of Each Receipt this Period 40.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Renal Federal Leg Affairs	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 760.00	•
	SUBTOTAL of Receipts This Page (optional)	L	105.00
	FOTAL This Period (last page this line number		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) A. Michael Murphy		Date of Receipt
Mailing Address 340 E Scranton Ave		0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Lake Bluff	State Zip Code IL 60044-2534	Transaction ID: 20100915172653-74 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation VP, Corporate Quality Aggregate Year-to-Date 950.00	
Full Name (Last, First, Middle Initial) Michael Murphy Mailing Address 340 E Scranton Ave		Date of Receipt
City	State Zip Code	0 9 1 7 2 0 1 0 Transaction ID: 20101012151846-74
<u>Lake Bluff</u>	IL 60044-2534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Corporate Quality	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Timothy J. Murphy		Date of Receipt
Mailing Address 14601 N Somerset C	ir	09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-147
<u>Libertyville</u> FEC ID number of contributing federal political committee.	IL 60048-4890	Amount of Each Receipt this Period 30.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Assoc General Counsel	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	564.60	
SUBTOTAL of Receipts This Page (optional)		130.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 87 (check only one) X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (nd Statements may not be sold or used by any perso the name and address of any political committee to Committee	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Timothy J. Murphy Mailing Address 14601 N Somerset City Libertyville	Cir State Zip Code IL 60048-4890	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General Other (specify) ▼	Occupation Assoc General Counsel Aggregate Year-to-Date 564.60	
Full Name (Last, First, Middle Initial) Peter J. O'Malley Mailing Address 791 Summit Ave		Date of Receipt M
City	State Zip Code	Transaction ID: 20100915172653-164
Lake Forest	IL 60045-1830	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	45.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Business Alliances	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 855.00	
Full Name (Last, First, Middle Initial) Peter J. O'Malley	1	Date of Receipt
Mailing Address 791 Summit Ave		09 / 17 / 2010
City Lake Forest	State Zip Code II 60045-1830	Transaction ID: 20101012151846-16
FEC ID number of contributing federal political committee.	IL 60045-1830	Amount of Each Receipt this Period 45.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Business Alliances	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 855.00	
SUBTOTAL of Receipts This Page (optional	J.	120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the such as	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	ommittee	
Full Name (Last, First, Middle Initial) A. Stasia L. Ogden		Date of Receipt
Mailing Address 1750 W Cortland St		0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Chicago	State Zip Code IL 60622-1123	Transaction ID: 20100915172653-101
Chicago FEC ID number of contributing federal political committee.	IL 60622-1123	Amount of Each Receipt this Period 20.00
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General	Occupation Asst General Counsel, Patent Aggregate Year-to-Date 380.00	
Full Name (Last, First, Middle Initial) Stasia L. Ogden Mailing Address 1750 W Cortland St	0 0 0 0 0 0 0 0	Date of Receipt
		09 17 2010
City Chicago	State Zip Code IL 60622-1123	Transaction ID: 20101012151846-101 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Asst General Counsel, Patent	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Thor F. Paulson		Date of Receipt
Mailing Address 13941 Cooper Way		09 03 7 2010
City	State Zip Code	Transaction ID: 20100915172653-80
Orland Park FEC ID number of contributing federal political committee.	IL 60467-7183	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Counsel	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
SUBTOTAL of Receipts This Page (optional)		65.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may not be sold or used by any perso the name and address of any political committee to	
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	ommittee	
Full Name (Last, First, Middle Initial) Thor F. Paulson		Date of Receipt
Mailing Address 13941 Cooper Way		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20101012151846-8
Orland Park	IL 60467-7183	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Counsel	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	
Full Name (Last, First, Middle Initial) Jed M. Perry		Date of Receipt
Mailing Address 5678 Kirkham Ct		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 20100915172653-1
Springfield	VA 22151-1710	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed Legislative Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Jed M. Perry		Date of Receipt
Mailing Address 5678 Kirkham Ct		09 17 2010
City	State Zip Code	Transaction ID: 20101012151846-1
Springfield	VA 22151-1710	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Fed Legislative Affairs	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	475.00	

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A	Any information copied from such Reports and sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Col	nmittee		
Α.	Full Name (Last, First, Middle Initial) Carla D. Pittman			Date of Receipt
	Mailing Address 3933 Kenway Ave			09 03 7 2010
	City Los Angeles	State CA	Zip Code 90008-4805	Transaction ID: 20100915172653-141 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		57.46
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Couns		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1084.96	
_ В.	Full Name (Last, First, Middle Initial) Carla D. Pittman			Date of Receipt
	Mailing Address 3933 Kenway Ave			09 17 2010
	City Los Angeles	State CA	Zip Code 90008-4805	Transaction ID: 20101012151846-140 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	30000 4003	57.46
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Couns		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1084.96	
_ c.	Full Name (Last, First, Middle Initial) Virginia L. Pringle			Date of Receipt
	Mailing Address 6655 Bobby Jones Ct			0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Palmetto	State FL	Zip Code	Transaction ID: 20100915172653-28
	FEC ID number of contributing federal political committee.	C	34221-6635	Amount of Each Receipt this Period 34.28
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr II, C	n perations	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 646.34	
	SUBTOTAL of Receipts This Page (optional) .			149.20
F	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	Statements may not be sold or used by any pers the name and address of any political committee to mmittee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Virginia L. Pringle Mailing Address 6655 Bobby Jones Co City Palmetto FEC ID number of contributing federal political committee.	State Zip Code FL 34221-6635	Date of Receipt M M M
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Mgr II, Operations Aggregate Year-to-Date ▼ 646.34	
Full Name (Last, First, Middle Initial) Joseph A. Pudlo Mailing Address 525 Trestle Ct		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Grayslake FEC ID number of contributing	State Zip Code IL 60030-2766	Transaction ID: 20100915172653-31 Amount of Each Receipt this Period
federal political committee. Name of Employer Baxter Healthcare Corpora-	Occupation VP, Sales	20.00
tion Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Joseph A. Pudlo		Date of Receipt
Mailing Address 525 Trestle Ct		09 17 2010
City <u>Grayslake</u>	State Zip Code IL 60030-2766	Transaction ID: 20101012151846-31 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Sales	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	
SUBTOTAL of Receipts This Page (optional)		74.28

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Julie A. Quick Mailing Address 3223 Epstein Cir City Mundelein FEC ID number of contributing federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify)	State Zip Code IL 60060-6049 C Occupation Sr Mgr, Reg Affairs Aggregate Year-to-Date 409.49	Date of Receipt M M / D D / Y Y Y Y Y O 9
Full Name (Last, First, Middle Initial) Julie A. Quick Mailing Address 3223 Epstein Cir City Mundelein FEC ID number of contributing federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify)	State Zip Code IL 60060-6049 C Occupation Sr Mgr, Reg Affairs Aggregate Year-to-Date 409.49	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Janet L. Raciti Mailing Address 19 Wimbledon Ct City Lincolnshire FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60069-2127 C Occupation Dir, Strategic Reimbursement Aggregate Year-to-Date ▼ 760.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		83.54

SCHEDULE A (FEC Form 3X))	Use separate schedule(s)	FOR LINE NUMBER: PAGE 61 / 87 (check only one)
TEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
Baxter Healthcare Political Action Co	mmittee		
Full Name (Last, First, Middle Initial) Janet L. Raciti			Date of Receipt
Mailing Address 19 Wimbledon Ct			09 17 2010
City	State	Zip Code	Transaction ID: 20101012151846-3
Lincolnshire	IL	60069-2127	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Baxter Healthcare Corpora-	Occupation		7
tion		egic Reimbursement	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		760.00	
Full Name (Last, First, Middle Initial) Sundar Ramanan	1		Date of Receipt
Mailing Address 1146 Azalea Way			0 9 0 3 2 0 1 0
City	State	Zip Code	Transaction ID: 20100915172653-1
Simi Valley	CA	93065-3336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		13.92
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Mgr, R		
Receipt For:	_ 	Year-to-Date ▼	7
Primary General Other (specify) ▼		262.26]
Full Name (Last, First, Middle Initial) Sundar Ramanan			Date of Receipt
Mailing Address 1146 Azalea Way			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20101012151846-1
Simi Valley	CA	93065-3336	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		13.92
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr Mgr, R		
Receipt For:	_ 	Year-to-Date ▼	7
Primary General Other (specify) ▼		262.26	
	1		i e

TOTAL This Period (last page this line number only)

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for com	nation copied from such Reports and St mercial purposes, other than using the OF COMMITTEE (In Full) or Healthcare Political Action Com	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A. David I Mailing City Glence FEC II federa	Ame (Last, First, Middle Initial) H. Resnicoff J. Address 926 Valley Rd Onumber of contributing political committee. of Employer International Inc.	State IL C		Date of Receipt M M D D Y Y Y Y Y Y Y Y
	ot For: Primary General Other (specify) ▼		en Coun/VP Compliance e Year-to-Date ▼ 1099.91	
B. David I	ame (Last, First, Middle Initial) H. Resnicoff I Address 926 Valley Rd			Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federa	number of contributing political committee.	State IL C	Zip Code 60022-1452	Amount of Each Receipt this Period 58.25
Receip	of Employer International Inc. of For: Primary General Other (specify)	-1	en Coun/VP Compliance e Year-to-Date ▼ 1099.91	
C. Darwin	ame (Last, First, Middle Initial) Richardson Address 3927 Corte Cancion			Date of Receipt
FEC II	sand Oaks Dinumber of contributing political committee.	State CA	Zip Code 91360-6917	Transaction ID: 20100915172653-53 Amount of Each Receipt this Period 20.00
Name Baxter tion Receip	of Employer Healthcare Corpora-		n or, Manufacturing e Year-to-Date ▼ 380.00	
SUBTOT	AL of Receipts This Page (optional)			136.50

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	nedule(s) of the	FOR LINE NUMBER: PAGE 63 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee		
∠ \ .	Full Name (Last, First, Middle Initial) Darwin Richardson			Date of Receipt
٦.	Mailing Address 3927 Corte Cancion			0 9 1 7 2 0 1 0
	City	State Zip Code		Transaction ID: 20101012151846-53
	Thousand Oaks	CA 91360-6917		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer Baxter Healthcare Corpora-	Occupation Sr Director, Manufacturing		
	tion Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		380.00	
_ 3.	Full Name (Last, First, Middle Initial) Dawn D. Robinson-Rose			Date of Receipt
	Mailing Address 1007 La Rambla Dr			09 03 2010
	City	State Zip Code		Transaction ID: 20100915172653-108
	Burbank	CA 91501-1621		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Implementation		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		475.00	
_ ;.	Full Name (Last, First, Middle Initial) Dawn D. Robinson-Rose	L		Date of Receipt
	Mailing Address 1007 La Rambla Dr			09 17 2010
	City	State Zip Code		Transaction ID: 20101012151846-108
	Burbank	CA 91501-1621		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		25.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Dir, Implementation		
	Receipt For:	Aggregate Year-to-Date ▼		
	Primary General Other (specify) ▼		475.00	
Γ	SUBTOTAL of Receipts This Page (optional)	<u> </u>	.	70.00
-	SOBTOTAL of neceipts Trils Page (optional)		·······	
	TOTAL This Period (last page this line number	only)	>	

SCHEDULE A (FEC Form 3X)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 64 / 87 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Com	nmittee		
Full Name (Last, First, Middle Initial) Jill A. Rowlison			Date of Receipt
Mailing Address 1280 21st St NW Apt 906			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-98
Washington	DC	20036-2384	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		23.26
Name of Employer Baxter Healthcare Corpora-	Occupatio Sr. Mar.	n PAC and Grassroots	
tion Receipt For:	- 	e Year-to-Date ▼	
Primary General Other (specify)	39.19	438.52	
Full Name (Last, First, Middle Initial) Jill A. Rowlison			Date of Receipt
Mailing Address 1280 21st St NW Apt 906			09 17 2010
City	State	Zip Code	Transaction ID: 20101012151846-98
Washington	DC	20036-2384	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		23.26
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Sr. Mgr,	n PAC and Grassroots	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 438.52	
Full Name (Last, First, Middle Initial) Joseph Russo			Date of Receipt
Mailing Address 27928 Periwinkle Ln			0 9 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 20100915172653-150
Valencia	CA	91354-1843	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		33.34
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Dir, Envi	n r Health & Safety	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	626.14]
SUBTOTAL of Receipts This Page (optional)			79.86

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co.	Statements may not be sold or used by any personal ename and address of any political committee to mmittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Joseph Russo Mailing Address 27928 Periwinkle Ln City Valencia FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code CA 91354-1843 C Occupation Dir, Envir Health & Safety Aggregate Year-to-Date ▼ 626.14	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Roibin Ryan Mailing Address 1419 W Berteau Ave City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60613-1914 C Occupation Deputy Gen Counsel, Lit & Empl Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Roibin Ryan Mailing Address 1419 W Berteau Ave City Chicago FEC ID number of contributing federal political committee. Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify)	State Zip Code IL 60613-1914 C Occupation Deputy Gen Counsel, Lit & Empl Aggregate Year-to-Date 1921.03	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	_	237.12

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	for eac	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 66 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A C	Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be so e name and address of a	old or used by any persony political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	nmittee		
∠ 4.	Full Name (Last, First, Middle Initial) Kaissar Saade			Date of Receipt
	Mailing Address 18522 Roslin Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip C	Code	Transaction ID: 20100915172653-73
	Torrance	CA 9050	04-4624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.14
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Principal Enginee	er	
	Receipt For:	Aggregate Year-to-D		
	Primary General Other (specify) ▼		323.26]
- 3.	Full Name (Last, First, Middle Initial) Kaissar Saade	L		Date of Receipt
	Mailing Address 18522 Roslin Ave			09 / 17 / 2010
	City	State Zip C	Code	Transaction ID: 20101012151846-73
	Torrance	CA 9050	04-4624	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		17.14
	Name of Employer Baxter Healthcare Corpora- tion	Occupation Principal Enginee	er	
	Receipt For:	Aggregate Year-to-D	Date ▼	
	Primary General Other (specify) ▼	0 0 0	323.26	
 :.	Full Name (Last, First, Middle Initial) James K. Saccaro	I		Date of Receipt
	Mailing Address PO Box 747 Baxter Expat Admin			09 03 7 2010
	City	State Zip (Transaction ID: 20100915172653-186
	Deerfield	IL 600	15-0747	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		62.50
	Name of Employer Baxter World Trade Corpor-	Occupation		
	ation Receipt For:	Agregate Veer to F		\dashv
	Primary General	Aggregate Year-to-D		1
	Other (specify) ▼		1102.48	
	SUBTOTAL of Receipts This Page (optional)			96.78
F	SOBTOTAL OF NECERPLS THIS FAGE (OPLICITAL)			
'	TOTAL This Period (last page this line number	only)		

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В.

C.

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 67 / 87			
ITEMIZED RECEIPTS		for each category of the	(check only one)			
		Detailed Summary Page	X 11a 11b 11c 12 15 16 17			
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)	Tiarrio and adv	aress or arry portion committee to	Solidi contributions from Such Committee.			
Baxter Healthcare Political Action Com	ımittaa					
Baxter Healthoure Folitical Action Com	iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii					
Full Name (Last, First, Middle Initial) James K. Saccaro			Date of Receipt			
Mailing Address PO Box 747 Baxter Expat Admin			09 17 2010			
City	State	Zip Code	Transaction ID: 20101012151846-185			
Deerfield	IL	60015-0747	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		62.50			
Name of Employer Baxter World Trade Corpor-	Occupatio					
ation		Assignment				
Receipt For:	Aggregate	e Year-to-Date ▼				
Primary General Other (specify) ▼		1102.48				
Other (specify)		0 0 0 0 0 0 0	1			
Full Name (Last, First, Middle Initial) Ashish Sagrolikar			Date of Receipt			
Mailing Address 1012 Alden Ln			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 20100915172653-156			
Buffalo Grove	IL	60089-1305	Amount of Each Receipt this Period			
FEC ID number of contributing		55555 -555				
federal political committee.	C		15.00			
Name of Employer Baxter Healthcare Corpora-	Occupatio					
tion · Receipt For:	VP I, Ma					
Primary General	Aggregate	e Year-to-Date ▼	1			
Other (specify)		255.00				
			1			
Full Name (Last, First, Middle Initial) Ashish Sagrolikar			Date of Receipt			
Mailing Address 1012 Alden Ln			M M / D D / Y Y Y Y Y O D D D D D D D D D D D D D D			
City	State	Zip Code	Transaction ID: 20101012151846-155			
Buffalo Grove	IL	60089-1305	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		15.00			
Name of Employer Baxter Healthcare Corpora-	Occupatio VP I, Ma					
tion Receipt For:		e Year-to-Date ▼				
Primary General	1.55.05410		1			
Other (specify)		255.00				
SUBTOTAL of Receipts This Page (optional)			92.50			

TOTAL This Period (last page this line number only)

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	e name and ad	ly not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions
∠ A .	Full Name (Last, First, Middle Initial) David P. Scharf			Date of Receipt
	Mailing Address 931 Oak St City	State	Zip Code	Transaction ID: 20100915172653-174
	Winnetka FEC ID number of contributing federal political committee.	C	60093-2440	Amount of Each Receipt this Period 91.35
	Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	eneral Counsel e Year-to-Date ▼ 1697.17	1
- В.	Full Name (Last, First, Middle Initial) David P. Scharf Mailing Address 931 Oak St	0 0	0 0 0 0 0 0 0 0	Date of Receipt
	City Winnetka	State IL	Zip Code 60093-2440	7
	FEC ID number of contributing federal political committee.	C	00033-24-40	Amount of Each Receipt this Period 91.35
	Name of Employer Baxter International Inc.	Occupation CVP, Ge	on eneral Counsel	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1697.17	
- C.	Full Name (Last, First, Middle Initial) Chandra Sekhar			Date of Receipt
	Mailing Address 1621 Mission Hills Ro Apt 211			09 03 2010
	City <u>Northbrook</u>	State IL	Zip Code 60062-5738	Transaction ID: 20100915172653-3 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		61.01
	Name of Employer Baxter Healthcare Corpora- tion		fg Strategic Planning	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1145.81	
	SUBTOTAL of Receipts This Page (optional)			243.71
	TOTAL This Period (last page this line numbe	r only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	Statements may not be sold or used by any personal parame and address of any political committee to mmittee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Chandra Sekhar Mailing Address 1621 Mission Hills Rd Apt 211 City Northbrook FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code IL 60062-5738 C Occupation VP II, Mfg Strategic Planning Aggregate Year-to-Date	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeffrey Allen Sexton Mailing Address 19 Cochran View Dr City Marion FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code NC 28752-6014 C Occupation Supv II, Manufacturing Aggregate Year-to-Date 220.90	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jeffrey Allen Sexton Mailing Address 19 Cochran View Dr City Marion FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State Zip Code NC 28752-6014 C Occupation Supv II, Manufacturing Aggregate Year-to-Date 220.90	Date of Receipt M M M / D D / Y Y Y Y Y O 9 1 7 2 0 1 0 Transaction ID: 20101012151846-90 Amount of Each Receipt this Period 12.18
SUBTOTAL of Receipts This Page (optional) .		87.81

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 87 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action C	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) George N. Sfondilis Mailing Address 1010 Glencrest Dr			Date of Receipt 0 9 0 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City Inverness FEC ID number of contributing	State IL	Zip Code 60010-5658	Transaction ID: 20100915172653-132 Amount of Each Receipt this Period 11.82
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	Occupatio Project N		
Full Name (Last, First, Middle Initial) George N. Sfondilis Mailing Address 1010 Glencrest Dr			Date of Receipt M M D D Y Y Y Y Y Y Y Y
City Inverness FEC ID number of contributing	State IL	Zip Code 60010-5658	Transaction ID: 20101012151846-13 Amount of Each Receipt this Period 11.82
Name of Employer Baxter Healthcare Corporation Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupatio Project M		
Full Name (Last, First, Middle Initial) John P. Shannon Mailing Address 432 W Utley Rd			Date of Receipt
City Elmhurst FEC ID number of contributing federal political committee.	State IL	Zip Code 60126-3216	Transaction ID: 20100915172653-160 Amount of Each Receipt this Period 61.54
Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼	Occupatio VP II, Ma Aggregate		
SUBTOTAL of Receipts This Page (optional	ı)		85.18

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Baxter Healthcare Political Action Cor	nmittee		
Α.	Full Name (Last, First, Middle Initial) John P. Shannon			Date of Receipt
	Mailing Address 432 W Utley Rd			09 / 17 / 2010
	City <u>Elmhurst</u>	State IL	Zip Code 60126-3216	Transaction ID: 20101012151846-159 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		61.54
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Ma		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1105.38	
- В.	Full Name (Last, First, Middle Initial) Terry (John) Simmons	1		Date of Receipt
	Mailing Address 1013 Windhaven Rd			09 03 7 2010
	City Libertyville	State IL	Zip Code 60048-3800	Transaction ID: 20100915172653-155 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00040 0000	15.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Glob	on oal Purchasing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.00	
- C.	Full Name (Last, First, Middle Initial) Terry (John) Simmons			Date of Receipt
	Mailing Address 1013 Windhaven Rd			09 17 2010
	City	State	Zip Code	Transaction ID: 20101012151846-154
	Libertyville FEC ID number of contributing federal political committee.	C	60048-3800	Amount of Each Receipt this Period 15.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Glob	on oal Purchasing	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 285.00	
	SUBTOTAL of Receipts This Page (optional)			91.54
	TOTAL This Period (last page this line number	only)		

ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72/8/ (check only one)
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (Committee		
Full Name (Last, First, Middle Initial) Lori E. Sims			Date of Receipt
Mailing Address 66 Cooper Dr			09 03 2010
City Glastonbury	State CT	Zip Code 06033-1020	Transaction ID: 20100915172653-102 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.88
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Mgr, Sta	n te Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 431.78	
Full Name (Last, First, Middle Initial) Lori E. Sims			Date of Receipt
Mailing Address 66 Cooper Dr			M M / D D / Y Y Y Y O O O O O O O O O O O O O O O
City Glastonbury	State CT	Zip Code 06033-1020	Transaction ID: 20101012151846-10 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		22.88
Name of Employer Baxter Healthcare Corpora- tion	Occupatio Mgr, Sta	n te Government Affairs	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 431.78	
Full Name (Last, First, Middle Initial) Deborah G. Spak			Date of Receipt
Mailing Address 1555 Stratford Rd			0 9 0 3 2 0 1 0
City Deerfield	State IL	Zip Code 60015-2147	Transaction ID: 20100915172653-18 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00010 2147	14.92
Name of Employer Baxter International Inc.	Occupatio Dir, Com	n munications	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 280.76	
SUBTOTAL of Receipts This Page (options	al)		60.68

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (the name and address of any political committ	person for the purpose of soliciting contributions ee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Deborah G. Spak Mailing Address 1555 Stratford Rd City Deerfield FEC ID number of contributing federal political committee.	State Zip Code IL 60015-2147	Date of Receipt M M M / D D D / Y Y Y Y Y Transaction ID: 20101012151846-180 Amount of Each Receipt this Period 14.92
Name of Employer Baxter International Inc. Receipt For: Primary General Other (specify) ▼	Occupation Dir, Communications Aggregate Year-to-Date 280.76	
Full Name (Last, First, Middle Initial) Janet M. Spaulding Mailing Address 4371 Silversmith L City Independence FEC ID number of contributing federal political committee.	State Zip Code KY 41051-8386	Date of Receipt M M M / D D / Y Y Y Y Y O 9 0 3 2 0 1 0 Transaction ID: 20100915172653-195 Amount of Each Receipt this Period 25.00
Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify) ▼	Occupation Regional Operations Manager Aggregate Year-to-Date 475.00	
Full Name (Last, First, Middle Initial) Janet M. Spaulding Mailing Address 4371 Silversmith L City Independence	n State Zip Code KY 41051-8386	Date of Receipt M M D D Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer BioLife Plasma L.L.C. Receipt For: Primary General Other (specify)	Occupation Regional Operations Manager Aggregate Year-to-Date 475.00	25.00
SUBTOTAL of Receipts This Page (options	al)	64.92

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 87 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	Baxter Healthcare Political Action Con	nmittee		
Α.	Full Name (Last, First, Middle Initial) Donald J. Sullivan			Date of Receipt
	Mailing Address 910 W Cypress Dr			09 03 7 2010
	City Arlington Heights	State IL	Zip Code	Transaction ID: 20100915172653-168
	FEC ID number of contributing federal political committee.	C	60005-3014	Amount of Each Receipt this Period 40.00
	Name of Employer Baxter International Inc.	Occupatio VP, Risk	n Management	
	Receipt For: Primary General Other (specify)	, ' ' 	e Year-to-Date ▼ 760.00	
_ B.	Full Name (Last, First, Middle Initial) Donald J. Sullivan			Date of Receipt
	Mailing Address 910 W Cypress Dr			09 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20101012151846-167
	Arlington Heights FEC ID number of contributing federal political committee.	C	60005-3014	Amount of Each Receipt this Period 40.00
	Name of Employer Baxter International Inc.	Occupatio VP, Risk	n Management	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 760.00	
_).	Full Name (Last, First, Middle Initial) Karenann Terrell			Date of Receipt
	Mailing Address 914 Queens Ln			09 03 2010
	City Glenview	State IL	Zip Code	Transaction ID: 20100915172653-178
	FEC ID number of contributing federal political committee.	C	60025-1940	Amount of Each Receipt this Period 192.31
	Name of Employer Baxter International Inc.	Occupatio CVP, Ch	n ief Information Officer	
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 3653.89	
	SUBTOTAL of Receipts This Page (optional)	1		272.31

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	e name and address of any political committe	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.
Baxter Healthcare Political Action Co	mmittee	
Full Name (Last, First, Middle Initial) Karenann Terrell		Date of Receipt
Mailing Address 914 Queens Ln		09 / 17 / 2010
City <u>Glenview</u>	State Zip Code IL 60025-1940	Transaction ID: 20101012151846-177 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	192.31
Name of Employer Baxter International Inc.	Occupation CVP, Chief Information Officer	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 3653.89	
Full Name (Last, First, Middle Initial) Ronald J. Trudeau Mailing Address 416 W. Onlywood Dr.		Date of Receipt
Mailing Address 416 W Oakwood Dr		09 03 2010
City	State Zip Code	Transaction ID: 20100915172653-1
Barrington	IL 60010-1482	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP II, Engineering	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	475.00	
Full Name (Last, First, Middle Initial) Ronald J. Trudeau		Date of Receipt
Mailing Address 416 W Oakwood Dr		09 17 2010
City	State Zip Code	Transaction ID: 20101012151846-1
Barrington FEC ID number of contributing federal political committee.	IL 60010-1482	Amount of Each Receipt this Period 25.00
Name of Employer Baxter Healthcare Corpora-	Occupation	
tion Receipt For:	VP II, Engineering Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	475.00	•
SUBTOTAL of Receipts This Page (optional)	1	242.31
CODITION INCOMPLETING FAGE (OPLICITAL)	r only)	

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	Statements may not be sold or used by name and address of any political co	y any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Onelia Ann Vera		Date of Receipt
Mailing Address 619 Oleander Dr		09 03 7 2010
City Hallandale Reach	State Zip Code	Transaction ID: 20100915172653-151
FEC ID number of contributing federal political committee.	C 33009-0331	Amount of Each Receipt this Period 103.92
Name of Employer Baxter Healthcare Corpora- tion	Occupation Assoc General Counsel	
Primary General Other (specify) ▼		56.30
Full Name (Last, First, Middle Initial) Onelia Ann Vera	l	Date of Receipt
Mailing Address 619 Oleander Dr		09 17 2010
City	State Zip Code	Transaction ID: 20101012151846-150
FEC ID number of contributing federal political committee.	C 33009-6531	Amount of Each Receipt this Period 103.92
Name of Employer Baxter Healthcare Corpora-	Occupation Assoc General Counsel	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	56.30
Full Name (Last, First, Middle Initial) Chris P. Vlautin		Date of Receipt
Mailing Address 4306 Arenzano Way		0 9 0 3 2 0 1 0
City	State Zip Code	Transaction ID: 20100915172653-97
EI Dorado Hills FEC ID number of contributing federal political committee.	CA 95762-5431	Amount of Each Receipt this Period 20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, State Government Affa	irs
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	80.00
UBTOTAL of Receipts This Page (optional) .	1	227.84
	Onelia Ann Vera Mailing Address 619 Oleander Dr City Hallandale Beach FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Onelia Ann Vera Mailing Address 619 Oleander Dr City Hallandale Beach FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Chris P. Vlautin Mailing Address 4306 Arenzano Way City El Dorado Hills FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify) ▼ UBTOTAL of Receipts This Page (optional)	Onelia Ann Vera Mailing Address 619 Oleander Dr City State Zip Code Hallandale Beach FL 33009-6531 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Occupation Assoc General Counsel Receipt For: Primary General Aggregate Year-to-Date ✓ Prill Name (Last, First, Middle Initial) Onelia Ann Vera Aggregate Year-to-Date ✓ Mailing Address 619 Oleander Dr C City State Zip Code Hallandale Beach FL 33009-6531 FEC ID number of contributing federal political committee. C Name of Employer Baxter Healthcare Corporation Assoc General Counsel Assoc General Counsel Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Aggregate Year-to-Date ▼ City State Zip Code El Dorado Hills CA 95762-5431 C C Name of Employer Baxter Healthcare Corporation C Name of Employer Baxter Healthcare Corporation C Name of Employer Baxter Healthcare Corporation C Aggregate Year-to-Date V

Any information copied from such Reports a or for commercial purposes, other than using		13 14 15 16 17
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action (nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Chris P. Vlautin	Sommittee	Date of Receipt
Mailing Address 4306 Arenzano Wa		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City El Dorado Hills	State Zip Code CA 95762-5431	Transaction ID: 20101012151846-97 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Mgr, State Government Affairs	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	
Full Name (Last, First, Middle Initial) Vernon E. Williams	Suit De	Date of Receipt
Mailing Address 1601 Wyndham Co		09 03 7 2010
City Santa Ana	State Zip Code CA 92705-3181	Transaction ID: 20100915172653-144
FEC ID number of contributing federal political committee.	CA 92703-3161	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
Full Name (Last, First, Middle Initial) Vernon E. Williams		Date of Receipt
Mailing Address 1601 Wyndham Co	purt Rd	0 9
City	State Zip Code	Transaction ID: 20101012151846-143
Santa Ana FEC ID number of contributing federal political committee.	CA 92705-3181	Amount of Each Receipt this Period 50.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Information Technology	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 950.00	
SUBTOTAL of Receipts This Page (options	al)	120.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	fo	lse separate schedule(s) or each category of the retailed Summary Page	FOR LINE NUMBER: PAGE 78 / 87 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	e name and address	be sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ron K. Wilson Mailing Address 6800 Red Rock Rd City Amarillo FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State TX C Occupation Sales Repres Aggregate Yea		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ron K. Wilson Mailing Address 6800 Red Rock Rd City Amarillo FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	State TX C Occupation Sales Repres Aggregate Yea		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Jerzy Wojcik Mailing Address 9375 Landings Ln Unit 404 City Des Plaines FEC ID number of contributing federal political committee. Name of Employer Baxter Healthcare Corporation Receipt For: Primary General Other (specify)	IL C Occupation	Zip Code 60016-5207 Global Regulatory r-to-Date ▼ 475.00	Date of Receipt M M M / D D / Y Y Y Y Y O 9
SUBTOTAL of Receipts This Page (optional)			65.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso ename and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Cor	nmittee	
Full Name (Last, First, Middle Initial) Jerzy Wojcik		Date of Receipt
Mailing Address 9375 Landings Ln Unit 404		09 / 17 / 2010
City Des Plaines	State Zip Code IL 60016-5207	Transaction ID: 20101012151846-157 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.00
Name of Employer Baxter Healthcare Corpora- tion	Occupation Sr. Manager, Global Regulatory	
Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	
Full Name (Last, First, Middle Initial) Subramaniam Yogendran		Date of Receipt
Mailing Address 1 Baxter Pkwy Baxter Healthcare Cor	p.	09 / 03 / Y Y Y Y Y Y
City Deerfield	State Zip Code IL 60015-4625	Transaction ID: 20100915172653-113 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	51.20
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, US Supply Chain	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 965.60	
Full Name (Last, First, Middle Initial) Subramaniam Yogendran		Date of Receipt
Mailing Address 1 Baxter Pkwy Baxter Healthcare Cor	p.	09 17 2010
City Deerfield	State Zip Code IL 60015-4625	Transaction ID: 20101012151846-113 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	51.20
Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, US Supply Chain	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 965.60	
SUBTOTAL of Receipts This Page (optional)		127.40
TOTAL This Period (last page this line number	· ·	

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 87 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Co	mmittee		
Α.	Full Name (Last, First, Middle Initial) Mahshid R. Zahed			Date of Receipt
	Mailing Address 400 Village Green Dri Unit 106	ve		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20100915172653-114
	<u>Lincolnshire</u>	IL	60069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer Baxter Healthcare Corpora- tion	Occupation VP, Qua		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 950.00	
В.	Full Name (Last, First, Middle Initial) Mahshid R. Zahed			Date of Receipt
	Mailing Address 400 Village Green Dri Unit 106	ve		0 9 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 20101012151846-114
	Lincolnshire	IL	60069	Amount of Each Receipt this Period
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	Primary General Other (specify) ▼		950.00	

SUBTOTAL of Receipts This Page (optional)	•	100.00
TOTAL This Period (last page this line number only)	•	10452.88

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П _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	Ĺ	22 28a	X 23	-	24 28c	25 29	26
	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commi	ne and address of any politica									
	Full Name (Last, First, Middle Initial) Brady for Congress Mailing Address PO Box 8277						of Disbu	ID: Cursemer		9E5F1I	E28C4F
	City the Woodlands	State Zip Code TX 77387	<u> </u>			Amou	nt of Ea	ach Disk	-	nent this	
	Purpose of Disbursement 2010 General Candidate Name Kevin Brady		Cat)11 egory/ ype				•		1000.0	00
	Office Sought: X House Senate President State: TX District: 08	ement For: 2010 Primary X General Other (specify)									
	Full Name (Last, First, Middle Initial) Chris Lee for Congress Mailing Address PO Box 15395					Date		ID: 9 ⁻ ursemer		ĚE4550 Ž 0 Ť	0°
	City Rochester Purpose of Disbursement 2010 General Candidate Name Christopher John Lee	State Zip Code NY 14615	Cat)11 egory/		Amou	nt of Ea	ach Dist		nent this	
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	Full Name (Last, First, Middle Initial) Citizens To Elect Rick Larsen					Date o	of Disbu	ID: 02 ursemer		D2C2	E16A5E
	Mailing Address PO Box 326 City Everett	State Zip Code WA 98206				0 9 Amou			oursen	nent this	
	Purpose of Disbursement 2010 General Candidate Name	30200)11 egory/						1000.0	00
	Rick Larsen Office Sought: X House Senate President State: WA District: 02	ement For: 2010 Primary X General Other (specify)		ype							
	UBTOTAL of Disbursements This Page (optional)			•						3000.0	

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!!	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21k 27	É	22 28a	X 23 28b	\square	24 28c	25 29	26 30
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)										
\geq	Baxter Healthcare Political Action Commit	tee									
	Full Name (Last, First, Middle Initial) Diana Degette for Congress Inc.					Date	action ID of Disburs	sement			
	Mailing Address PO Box 61337					0 9		29		010	
	City Denver	State Zip Code CO 80206				Amou	nt of Eac	h Disbu		t this Pe	eriod
	Purpose of Disbursement 2010 General Candidate Name		_	011					10	00.00	
	Diana L. DeGette	ement For: 2010		tegory/ Type							
	Senate President	Primary X General Other (specify)									
	State: CO District: 01 Full Name (Last, First, Middle Initial) Hoosiers for Hill						action ID			BF141	1C85[
	Mailing Address PO Box 1071					0 ^M 9	M / D	2 1 /	y y	010	Y
	City Seymour	State Zip Code IN 47274				Amou	nt of Eac	h Disbu			eriod
	Purpose of Disbursement 2010 General			011		L.			10	00.00	
	Candidate Name Baron P. Hill			tegory/ Γype							
	Office Sought: X House Senate President State: IN District: 09	ement For: 2010 Primary X General Other (specify)									
	Full Name (Last, First, Middle Initial) Hoyer for Congress					Date	action ID	sement			
	Mailing Address 607 14th Street, NW Suite 800					0 9	M / D	29	, ž	0 1 0	Y
	City Washington	State Zip Code DC 20005				Amou	nt of Eac	h Disbu			eriod
	Purpose of Disbursement 2010 General			011		L.			25	00.00	
	Candidate Name Steny H. Hoyer			tegory/ Γype							
	Office Sought: X House Senate President State: MD District: 05	ement For: 2010 Primary X General Other (specify)									
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oort Beach se of Disburseme General date Name B. T. Campbe Sought: CA Dist ame (Last, First, D. Dingell for	m such Reports s, other than usin EE (In Full) Political Action Middle Initial) Congress 590 Macarthur Lite 500 ent II, III House Senate President Lrict: 48 Middle Initial)	and Statemering the name and Committee Boulevard State Committee	nts may no and address		l comm		solici	Trans Date o	action of Disbu	of solices from	7B774	9FFFF	FACD1
mercial purposes OF COMMITTE or Healthcare F ame (Last, First, Campbell for O g Address 45 St bort Beach se of Disburseme General date Name B. T. Campbe Sought: X CA Dist ame (Last, First, D. Dingell for	e, other than using the control of t	Boulevard Sta	ate A ent For:	Zip Code 92660	l comm	onittee to s	solici	Trans Date o	action of Disbu	ID:	7B774	9FFFF	FACD1
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	Senate President	X C	Primary Other (spe	2010 General ecify)	•								
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE (check only	one) 22 X 23 24 25	26
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or for commercial purposes, other than using the				
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Con	nmittee			
Full Name (Last, First, Middle Initial)				
Kind for Congress Committee			Transaction ID: B5BCE66C7153El Date of Disbursement	E330
Mailing Address 205 5th Avenue Sou Suite 428	th		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Q \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} M & M \\ & Z & I \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ & Z & O & I & O \end{smallmatrix} \end{bmatrix} $	
City La Crosse	State Zip Code WI 54601		Amount of Each Disbursement this Period	od
Purpose of Disbursement 2010 General		011	1000.00	
Candidate Name Ron Kind		Category/ Type		
Senate President	bursement For: 2010 Primary X General Other (specify) ▼			
State: WI District: 03				
Full Name (Last, First, Middle Initial) Kirk for Senate			Transaction ID: 748BED7B85A7B3	38F:
Mailing Address PO Box 8			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{bmatrix}$	
City Winnetka	State Zip Code IL 60093		Amount of Each Disbursement this Period	od
Purpose of Disbursement 2010 Special		011	5000.00	
Candidate Name Mark Steven Kirk		Category/ Type		
Office Sought: House X Senate President	bursement For: 2010 Primary General X Other (specify)			
State: IL District: Sp	ecial			
Full Name (Last, First, Middle Initial) Michael Burgess for Congress			Transaction ID: 7236E25696EA3B Date of Disbursement	37D9
Mailing Address PO Box 2334			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & 1 & O \end{bmatrix}$	
City Denton	State Zip Code TX 76202		Amount of Each Disbursement this Period	od
Purpose of Disbursement 2010 General		011	1000.00	
Candidate Name Michael C. Burgess		Category/ Type		
Office Sought: X House Dis Senate President	bursement For: 2010 Primary X General Other (specify) ▼			
State: TX District: 26	·			
SUBTOTAL of Disbursements This Page (option	onal)	>	7000.00	
TOTAL This Period (last page this line number	only)			

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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30
ny Information copied from such Reports and State		by any person t	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Baxter Healthcare Political Action Comm	ittee		
Full Name (Last, First, Middle Initial)			Transaction ID: C20EAFFB02D45E6
Pallone for Congress			Date of Disbursement O 9 2 9 2 0 1 0
Mailing Address PO Box 3176			$0^{M}9^{M}$ / $2^{D}9$ / $2^{V}2^{V}1^{V}$
City Long Branch	State Zip Code NJ 07740		Amount of Each Disbursement this Period
Purpose of Disbursement	110 07740		1000.00
2010 General Candidate Name		011	
Frank Pallone, Jr.		Category/ Type	
Office Sought: X House Disbur	sement For: 2010 Primary X General		
President	Other (specify)		
State: NJ District: 06			
Full Name (Last, First, Middle Initial) Pascrell for Congress			Transaction ID: 261C6C7D5D3BEB90 Date of Disbursement
Mailing Address PO Box 640			09 / 29 / 2010
City Totowa	State Zip Code NJ 07511		Amount of Each Disbursement this Period
Purpose of Disbursement	07311	044	1000.00
2010 General Candidate Name William J. Pascrell, Jr.		011 Category/ Type	
Office Sought: X House Senate President State: NJ Disbur	sement For: 2010 Primary X General Other (specify)		
Full Name (Last, First, Middle Initial) Richard Burr Committee; the			Transaction ID: 37D85F0376E05E49li Date of Disbursement
Mailing Address Post Office Box 5928			$ \begin{bmatrix} M & M \\ 0 & 9 \end{bmatrix} \begin{bmatrix} D & D \\ 2 & 1 \end{bmatrix} \begin{bmatrix} Y & Y & Y & Y & Y & Y & Y & Y & Y & Y &$
City Winston-Salem	State Zip Code NC 27113		Amount of Each Disbursement this Period
Purpose of Disbursement 2010 General	27110	011	1000.00
Candidate Name Richard M. Burr		Category/ Type	
Office Sought: House X Senate President	sement For: 2010 Primary X General Other (specify)	71:-2	
State: NC District:	Salor (opcony)		
<u> </u>			

TEMIZED DI	B (FEC Form 3X) SBURSEMENTS	Use separate schedule(for each category of the Detailed Summary Page	(ch	R LINE I eck only	one) 22 X 23	PAGE 86 / 87
	ed from such Reports and State					
NAME OF COM	rposes, other than using the nam MITTEE (In Full) care Political Action Commi		ai committi	ee to soli	cit contributions t	rom such committee
Full Name (Last, Rogers for Co	First, Middle Initial)				Transaction II Date of Disburs	D: 3E81CBDEC2E696F7
Mailing Address	PO Box 581 Post Office Box 581					29 7 2010
City Brighton	1 ost Office Box 301	State Zip Code MI 48116			Amount of Eac	h Disbursement this Period
Purpose of Disbrace 2010 General			011			1000.00
Candidate Name Mike Rogers			Catego Type			
Office Sought: State: MI	X House Disburs Senate President District: 08	ement For: 2010 Primary X Genera Other (specify) ▼				
Full Name (Last,	First, Middle Initial) ongress Committee				Date of Disburs	
Mailing Address	PO Box 713				09 / 0	21
City Wheaton		State Zip Code IL 60187			Amount of Eac	h Disbursement this Period
Purpose of Disb 2010 General			011			1000.00
Candidate Name Peter J. Roska	am		Catego Type	,		
Office Sought: State: IL	X House Disburs Senate President District: 06	ement For: 2010 Primary X Genera Other (specify) ▼				
Full Name (Last, Sue Myrick for	First, Middle Initial)				Date of Disburs	
Mailing Address	PO Box 37091				09 / 0	21 2010
City Charlotte		State Zip Code NC 28237			Amount of Eac	h Disbursement this Period
Purpose of Disb 2010 General			011			500.00
Candidate Name Sue Wilkins M			Catego Type	-		
Office Sought:	X House Disburs Senate President	ement For: 2010 Primary X Genera Other (specify) ▼				
State: NC	District: 09					
SUBTOTAL of Dis	bursements This Page (optional)			•		2500.00

В.

District: 19

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS		PAGE 87 / 87 check only one) 21b
Any Information copied from such Reports and States or for commercial purposes, other than using the nan		
NAME OF COMMITTEE (In Full) Baxter Healthcare Political Action Commi	tee	
Full Name (Last, First, Middle Initial) Upton for All of Us		Transaction ID: BBF52595770EAAC75 Date of Disbursement
Mailing Address PO Box 490		0 9 M / D 2 1 Y Y 2 0 1 0 Y
City St. Joseph	State Zip Code MI 49085	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 General	0.	1000.00
Candidate Name Fredrick Stephen Upton		egory/ /pe
Office Sought: X House Disburs Senate President State: MI District: 06	ement For: 2010 Primary X General Other (specify)	
Full Name (Last, First, Middle Initial) Volunteers for Shimkus		Transaction ID: 3EC4C90E5E4EEDBFI Date of Disbursement
Mailing Address PO Box 661 PO Box 5458		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Collinsville	State Zip Code IL 62234	Amount of Each Disbursement this Period
Purpose of Disbursement 2010 General	0-	1000.00
Candidate Name John M. Shimkus		egory/ /pe
Office Sought: X House Senate President Disburs	ement For: 2010 Primary X General Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	26000.00

State: IL